

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769690

FILED
Apr 13, 2009
Secretary of State

Entity Name: OCEAN REEF MARINA CONDOMINIUM I ASSOCIATION, INC.

Current Principal Place of Business:

10 BARRACUDA LN
KEY LARGO, FL 33037 US

New Principal Place of Business:

1 BARRACUDA LN
KEY LARGO, FL 33037 US

Current Mailing Address:

10 BARRACUDA LN
KEY LARGO, FL 33037 US

New Mailing Address:

1 BARRACUDA LN
KEY LARGO, FL 33037 US

FEI Number: 59-2379984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, EVELYN
10 BARRACUDA LN
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

MOSS & ASSOCIATES PROPERTY MGMT.
1 BARRACUDA LN
KEY LARGO, FL 33037 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EVELYN MOSS

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BLOOM, GREGORY
Address: 10 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: PD () Delete
Name: MACAULAY, BLAIR
Address: 10 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: POA () Delete
Name: MOSS, EVELYN
Address: 10 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: VD () Delete
Name: WISHNACK, MARSHALL
Address: 10 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Delete
Name: HAMMETT, GREY
Address: 10 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MACAULAY, BLAIR
Address: 1 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: VP (X) Change () Addition
Name: WISHNACK, MARSHALL
Address: 1 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: ST (X) Change () Addition
Name: HAMMETT, GREY
Address: 1 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: MA (X) Change () Addition
Name: MOSS, EVELYN
Address: 1 BARRACUDA LN
City-St-Zip: KEY LARGO, FL 33037

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELYN MOSS

MA

04/13/2009

Electronic Signature of Signing Officer or Director

Date