

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769791

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** OCEAN DUNES CLUB PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5311-19 SOUTH HIGHWAY AIA  
MELBOURNE, FL 32951 US

**New Principal Place of Business:**

**Current Mailing Address:**

28 COBBLESTONE CIR  
4  
RICHMOND, VA 23238 US

**New Mailing Address:**

**FEI Number:** 65-0051944      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAMOLEWICZ, RICHARD  
C/O RIGHT MANAGEMENT  
2101 W. COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33309 US

**Name and Address of New Registered Agent:**

SAMOLEWICZ, RICHARD  
220 SE 3RD CT  
POMPANO BEACH, FL 33060 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: \_\_\_\_\_ 03/23/2009  
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SAMOLEWICZ, RICHARD  
Address: P O BOX 510723  
City-St-Zip: MELBOURNE BEACH, FL 329510723

Title: DVS ( ) Delete  
Name: GUERRA, ROBERT  
Address: 5311 SOUTH HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D ( ) Delete  
Name: JAMES, SHELTON  
Address: 5313 SOUTH HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DPT ( ) Delete  
Name: CLEVELAND, ANTONETTE  
Address: 5317 S. HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DPT ( ) Delete  
Name: CZECHOWSKI, WILLIAM  
Address: 5319 S. HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: ANTONETTE J CLEVELAND      PRES      03/23/2009  
Electronic Signature of Signing Officer or Director Date