## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 17, 2008 8:00 am Secretary of State **DOCUMENT #790996** 04-17-2008 90021 039 \*\*\*\*61.25 SECOND OCEAN CLUB HOUSING ASSOCIATION, INC. Principal Place of Business Mailing Address 4410 N. A1A 4410 N. A1A VERO BEACH, FL 32963 VERO BEACH, FL 32963 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 01072008 Cha-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-1318433 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FIONDELLA, EDWARD Street Address (P.O. Box Number is Not Acceptable) 4410 N. A1A VERO BEACH, FL 32963 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Make check payable to Florida Department of State Due by May 1, 2008 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Addition Change FIONDELLA, EDWARD NASAF NAME STREET ADDRESS 4410 N. A1A #312 STREET ADDRESS CITY-ST-ZIP VEOR BEACH, FL 32963 CITY-ST-ZIP VD Delete TITLE TITLE ☐ Change Addition MORRIS, ROBERT NAME NAME STREET ADDRESS 1810 NW 23RD BLVD.#128 STREET ADDRESS CTTY-ST-ZP GAINESVILLE, FL CITY-ST-7/P TITLE Delete TIT: F Change \_\_\_ Addition DION-KNIGHT, CYNTHIA Jerome Roth NAME NAME 4410 N. AIA # 110 STREET ADDRESS 621 WITCHES ROCK RD. STREET ADDRESS CITY-ST-ZIP BRISTOL, CT 06010 Vero Beach FL 32963 CITY-ST-7/P TITS F Detete TITLE ☐ Change ☐ Addition STEDRONSKY, BARBARA NAME NAME STREET ADDRESS 623 SELKIRK DR. STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32792 CITY-ST-7P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CiTY-ST-ZIP

CITY-ST-ZIP

Delete

Delete

SIGNATURE: \_

WALLACE, GEORGE

4987 DIGMAN SCHOOL RD.

EAST JORDAN, MI 49727

1020 EASTACE DR.

**DIXON, IL 61024** 

LUDWIG, DEAN

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Exercit Frontella

Change

☐ Change

☐ Addition

Addition

#790996

D Harry SAWYER 2627 Collins Ave. LAKELAND, FL 33803