

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00003

FILED  
Feb 26, 2008  
Secretary of State

**Entity Name:** EBB TIDE AT MELBOURNE BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2999 SOUTH HIGHWAY A1A  
MELBOURNE BEACH, FL 32951

**New Principal Place of Business:**

**Current Mailing Address:**

2999 SOUTH HIGHWAY A1A  
MELBOURNE BEACH, FL 32951 US

**New Mailing Address:**

**FEI Number:** 59-2023599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COCKERELL, LEE  
2999 S. HWY. A1A  
MELBOURNE BEACH, FL 32951 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CRAIGE, TOM  
Address: 2999 S. A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TD ( ) Delete  
Name: BRAVO, JANCIE  
Address: 2999 S HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VPDT ( ) Delete  
Name: COCKERELL, LEE  
Address: 2999 S. HWY. A1A  
City-St-Zip: MELBOURNE BEACH, FL

Title: SD ( ) Delete  
Name: MURDOCH, TOM  
Address: 2999 S HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PD (X) Change ( ) Addition  
Name: GRANGER, ALTON L  
Address: 2999 S. A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

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: D ( ) Change (X) Addition  
Name: AMBROSE, CHRIS  
Address: 2999 S. HWY. A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

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: LEE COCKERELL

VPD

02/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date