

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01927

FILED
Feb 07, 2007
Secretary of State

Entity Name: OCEAN BREEZE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

241 CANAVERAL BCH. BLVD.
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

241 CANAVERAL BCH. BLVD.
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

FEI Number: 59-2777353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POINDEXTER, EILEEN
241 CANAVERAL BCH. BLVD.
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

POINDEXTER, TONY
241 CANAVERAL BCH. BLVD.
CAPE CANAVERAL, FL 32920 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: TONY POINDEXTER

02/07/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: POINDEXTER, EILEEN
Address: 241 CANAVERAL BCH. BLVD.
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: P () Delete
Name: BOUCHARD, CAROL
Address: 243 CANAVERAL BCH. BLVD.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: V () Delete
Name: DELEON, MANUEL
Address: 239 CANAVERAL BCH BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: S () Delete
Name: POINDEXTER, TONY
Address: 241 CANAVERAL BCH BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: POINDEXTER, TONY
Address: 241 CANAVERAL BCH. BLVD.
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: P (X) Change () Addition
Name: CHASTAIN, TOM
Address: 233 CANAVERAL BCH. BLVD.
City-St-Zip: CAPE CANAVERAL, FL 32920

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 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: TONY POINDEXTER

T

02/07/2007

Electronic Signature of Signing Officer or Director

Date