2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# N03000001070

Entity Name: OCEAN PLACE CONDOMINIUM ASSOCIATION OF SOUTH BEACH, INC.

Current Principal Place of Business:

226 OCEAN DR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

C/O MAXWELL MANAGEMENT
1521 ALTON ROAD, #703
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 16-1655569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAXWELL MANAGEMENT CORPORATION
1521 ALTON ROAD
703
MIAMI BEACH, FL 33139 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: PRES ( ) Delete
Name: EVANS, WILLIAM B
Address: 226 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete
Name: LIVINGSTONE, BARRY
Address: 226 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: TREA ( ) Delete
Name: AFRICANO, THOMAS
Address: 226 OCEAN DR.IVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: SEC (X) Delete
Name: EVANS, ANNA C
Address: 226 OCEAN DR.IVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: CORRIGAN, ELAINE ANDRAE
Address: 226 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP (X) Change ( ) Addition
Name: GOSNELL, DOUGLAS
Address: 226 OCEAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: TREA (X) Change ( ) Addition
Name: BOYCE, KATHRYN B
Address: 226 OCEAN DR.IVE
City-St-Zip: MIAMI BEACH, FL 33139

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: EDNA MAXWELL MGR. 01/28/2008

Electronic Signature of Signing Officer or Director — Date