## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006344

Apr 24, 2007 Secretary of State

Entity Name: OCEANSIDE TOWN HOMES ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

6015 MORROW STREET EAST, SUITE 107 JACKSONVILLE, FL 32217

**New Mailing Address: Current Mailing Address:** 

C/O BMI

6015 MORROW ST., E., SUITE 107 JACKSONVILLE, FL 32217

FEI Number: 51-0475908 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BANNING MANAGEMENT INC 6015 MORROW STREET EAST SUITE 107 JACKSONVILLE, FL 32217 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition LUBKE, LOUIS LUBKE, LOUIS Name: Name: 1026 2ND STREET SOUTH, #A Address: 1026 2ND STREET SOUTH, #A Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD () Delete Title: () Change () Addition BOTHWELL, CHUCK Name: Name:

Address: 1026 2ND STREET SOUTH, #D Address: City-St-Zip: JACKSOVILLE BEACH, FL 32250 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

KEMP, LOUIS KEMP, LOUIS Name: Name:

1026 2ND STREET SOUTH, #B Address: Address: 1026 2ND STREET SOUTH, #B City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: ( ) Delete Title: VD (X) Change ( ) Addition

Name: BAXTER, DOUG Name: BAXTER, DOUG 1026 2ND STREET SOUTH, #C 1843 ADMIRAL CT Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: GLENVIEW, IL 60026

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: BOTHWELL PD 04/24/2007