2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N03000006344

Entity Name: OCEANSIDE TOWN HOMES ASSOCIATION, INC.

Current Principal Place of Business:

C/O BMI
6015 MORROW STREET EAST, SUITE 107
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

C/O BMI
6015 MORROW ST., E., SUITE 107
JACKSONVILLE, FL 32217

New Mailing Address:

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

Name and Address of Current Registered Agent:

BANNING MANAGEMENT INC
6015 MORROW STREET EAST
SUITE 107
JACKSONVILLE, FL 32217 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: S ( ) Delete
Name: LUBKE, LOUIS
Address: 1026 2ND STREET SOUTH, #A
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD ( ) Delete
Name: BOTHWELL, CHUCK
Address: 1026 2ND STREET SOUTH, #D
City-St-Zip: JACKSOVILLE BEACH, FL 32250

Title: T ( ) Delete
Name: KEMP, LOUIS
Address: 1026 2ND STREET SOUTH, #B
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VD ( ) Delete
Name: BAXTER, DOUG
Address: 1843 ADMIRAL CT
City-St-Zip: GLENVIEW, IL 60026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ( ) 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: CHUCK BOTHWELL PD 04/29/2008

Electronic Signature of Signing Officer or Director — Date