


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2008 8:00 am**  
**Secretary of State**

04-24-2008 90118 043 \*\*\*\*61.25

<b>DOCUMENT # N03000007752</b>					
<b>1. Entity Name</b> OCEAN RITZ OWNERS' ASSOCIATION, INC.					
<b>Principal Place of Business</b> 10611 FRONT BEACH RD PANAMA CITY BEACH, FL 32407			<b>Mailing Address</b> 9400 S THOMAS DR PANAMA CITY, FL 32408		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 20-1878209	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  GRIFFIN, EDWIN W JR 9400 S THOMAS DR PANAMA CITY, FL 32408			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> PD	<b>NAME</b> PULLARA, SAMUEL J <input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 1029 LAUREL GROVE CT	<b>CITY - ST - ZIP</b> SUWANEE, GA 30024		<b>STREET ADDRESS</b>	<b>CITY - ST - ZIP</b>	
<b>TITLE</b> VD	<b>NAME</b> ARVIN, JOHN R <input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 10611 FRONT BEACH RD UNIT 603	<b>CITY - ST - ZIP</b> PANAMA CITY BEACH, FL 32407		<b>STREET ADDRESS</b>	<b>CITY - ST - ZIP</b>	
<b>TITLE</b> SD	<b>NAME</b> SHRIMP, PAUL J <input type="checkbox"/> Delete		<b>TITLE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 2451 CUMBERLAND PKWY STE 3514	<b>CITY - ST - ZIP</b> ATLANTA, GA 30339		<b>STREET ADDRESS</b>	<b>CITY - ST - ZIP</b>	
<b>TITLE</b> TD	<b>NAME</b> BENNETT, PAM <input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 1080 BRIDGEMILL AVE	<b>CITY - ST - ZIP</b> CANTON, GA 30114		<b>STREET ADDRESS</b>	<b>CITY - ST - ZIP</b>	
<b>TITLE</b> D	<b>NAME</b> REYNOLDS, LUNTZ C DR <input type="checkbox"/> Delete		<b>TITLE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 282 STEPHENSON AVE	<b>CITY - ST - ZIP</b> LOOKOUT MOUNTAIN, TN 37350		<b>STREET ADDRESS</b>	<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>NAME</b>			<b>NAME</b>		
<b>STREET ADDRESS</b>			<b>STREET ADDRESS</b>		
<b>CITY - ST - ZIP</b>			<b>CITY - ST - ZIP</b>		
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> <i>John R Arvin</i>			Date <u>1/20/08</u> Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					