

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009148

FILED
Mar 20, 2008
Secretary of State

Entity Name: INTERCOASTAL MARINA ASSOCIATION AT OCEANIA, INC.

Current Principal Place of Business:

19950 WEST COUNTRY CLUB DRIVE
TENTH FLOOR
AVENTURA, FL 33180

New Principal Place of Business:

16500 COLLINS AV
1553
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

19950 WEST COUNTRY CLUB DRIVE
TENTH FLOOR
AVENTURA, FL 33180

New Mailing Address:

16500 COLLINS AV
1553
SUNNY ISLES BEACH, FL 33160

FEI Number: 20-1645059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEDER, ERIC
21376 MARINA COVE CIRCLE C-15
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

CECERE, JOHN T
16500 COLLINS AV
1553
SUNNY ISLES BEACH, FL 33160 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: JOHN T CECERE

03/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FEDER, ERIC
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR
City-St-Zip: AVENTURA, FL 33180

Title: DST () Delete
Name: VOLRATH, ROBERT
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: SEIKALY, RONY
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CECERE, JOHN T
Address: 16500 COLLINS AV #1553
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DVP (X) Change () Addition
Name: LEWIS, CLIVE
Address: 16500 COLLINS AV #3051
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DST (X) Change () Addition
Name: HIGGINS, JOHN
Address: 16445 COLLINS AV #1425
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: JOHN T CECERE

DP

03/20/2008

Electronic Signature of Signing Officer or Director

Date