

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005534

FILED
Mar 11, 2009
Secretary of State

Entity Name: OCEAN WALK AT NEW SMYRNA BEACH - BUILDING NO. 9 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 65-1247863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD () Delete
Name: BURZAWA, FRED
Address: 5300 S ATLANTIC AVE #9507
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD () Delete
Name: O'DONNELL, MICHAEL
Address: 5300 S ATLANTIC AVE #9304
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TD () Delete
Name: BELITZ, GREG
Address: 5300 S ATLANTIC AVE #9507
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: SD () Delete
Name: POWERS, KAY
Address: 5300 S ATLANTIC AVE #9204
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D () Delete
Name: VEDNER, HOWARD
Address: 5300 S ATLANTIC AVE #9407
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FIORDALIS, RUTH
Address: 13540 LEDGEBROOK LN
City-St-Zip: CHAGRIN FALLS, OH 44022

Title: VPSD (X) Change () Addition
Name: BELITZ, GREG
Address: 5300 S ATLANTIC AVE #9206
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TD (X) Change () Addition
Name: POWERS, BILL
Address: 5300 S ATLANTIC AVE #7401
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D (X) Change () Addition
Name: AMUZA, JOHN
Address: 441 E CEDAR LN
City-St-Zip: THIENSVILLE, WI 53092

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: FRED BURZAWA

PD

03/11/2009

Electronic Signature of Signing Officer or Director

Date