

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011294

FILED
Jan 14, 2009
Secretary of State

Entity Name: OCEAN GROVE OF PONTE VEDRA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1 ARBOR CLUB DR.
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

1 ARBOR CLUB DR.
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-1983752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENZIEN, DIRK E
1 ARBOR CLUB DRIVE
PONTE VEDRA BEACH, FL 32082 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: PRES () Delete
Name: RANDALL, JOHN
Address: 15 ARBOR CLUB DRIVE #211
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP () Delete
Name: PARADISE, BRIAN
Address: 13 ARBOR CLUB DRIVE #315
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP 2 () Delete
Name: HERNANDEZ, PEDRO
Address: 9 ARBOR CLUB DRIVE #101
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SEC () Delete
Name: BROWN, LYNN
Address: 105 GLENMAWR CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: TREA () Delete
Name: MCCORMACK, JOHN
Address: 2805 APPLACHEE WAY
City-St-Zip: JACKSONVILLE, FL 32259

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:

Title: TREA (X) Change () Addition
Name: KORNMEYER, WILLIAM
Address: 13 ARBOR CLUB DRIVE #103
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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 RANDALL

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date