2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008 8:00 am
Secretary of State
03-21-2008 90015 031 ****70.00

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1. Entity Name
OCEAN PLACE AT SILVER BEACH ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3236 NE 5TH ST. POMPANO BEACH, FL 33062	3236 NE 5TH ST. POMPANO BEACH, FL 33062

02212008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. Box 24624
City & State	City & State FORT LAUDERDALE FL
Zip / Country	Zip / Country 33307

4. FEI Number
26-0157885
☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KORCHMAR, GREGORY
3236 NE 5TH ST.
POMPANO BEACH, FL 33062

7. Name and Address of New Registered Agent

Name
TD SUNSHINE
Street Address (P.O. Box Number is Not Acceptable)
2530 NE 15TH AVE.
City
FORT LAUDERDALE **FL** Zip Code 33305

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.

SIGNATURE TDSunshine 3/14/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KORCHMAR, GREGORY 3236 NE 5TH ST. POMPANO BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KORCHMAR, GREGORY 294 ATLANTIC AVE SUNNY ISLES BEACH FL 33160	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KORCHMAR, VICKY 3236 NE 5TH ST. POMPANO BEACH, FL 33062	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ABADI, JUDITH L. 3236 NE 5TH ST APT # 702 POMPANO BEACH FL 33062	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KORCHMAR, MICHAEL 3236 NE 5TH ST. POMPANO BEACH, FL 33062	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BEESON, MARY 3236 NE 5TH ST. APT # 401 POMPANO BEACH FL. 33062	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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.

SIGNATURE: S. Abadi JUDITH L. ABADI 3.15.2008 (954)9412736
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #