

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003189

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** OCEAN PLACE AT SILVER BEACH ASSOCIATION, INC.

**Current Principal Place of Business:**

3236 NE 5TH ST.  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

TD SUNSHINE  
PO BOX 24624  
FORT LAUDERDALE, FL 33307

**New Mailing Address:**

TDSUNSHINE PROPERTY MANAGEMENT  
PO BOX 122015  
FORT LAUDERDALE, FL 33317

**FEI Number:** 26-0157885

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GARFINKEL, KATZMAN  
1501 NORTHWEST 49TH ST.  
STE. 202  
FT. LAUDERDALE, FL 33309 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: D ( ) Delete  
Name: KORCHMAR, GREGORY  
Address: 294 ATLANTIC AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: T ( ) Delete  
Name: ABADI, JUDITH L  
Address: 3236 NE 5TH ST.APT #702  
City-St-Zip: POMPANO BEACH, FL 33062

Title: S ( ) Delete  
Name: BEESON, MARY  
Address: 3236 NE 5TH ST.#APT 401  
City-St-Zip: POMPANO BEACH, FL 33062

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GAUTHIER, LUC  
Address: 3236 NE 5TH STREET # 601  
City-St-Zip: POMPANO BEACH, FL 33062

Title: T (X) Change ( ) Addition  
Name: ABADI, CHAIM  
Address: 3236 NE 5TH ST.APT #702  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D (X) Change ( ) Addition  
Name: BEESON, MARY  
Address: 3236 NE 5TH ST.#APT 401  
City-St-Zip: POMPANO BEACH, FL 33062

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: LUC GAUTHIER

P

04/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date