

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008448

FILED
Apr 16, 2012
Secretary of State

Entity Name: OCEAN WALK AT NEW SMYRNA BEACH - BUILDING NO. 12 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5300 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

5300 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

C/O SURFCOAST REALTY INC
366 FLAGLER AVENUE
NEW SMYRNA BEACH, FL 32169

FEI Number: 36-4651211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SURFCOAST REALTY, INC.
366 FLAGLER AVENUE
NEW SMYRNA BEACH, FL 32169 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: T
Name: HANSON, RAYMOND
Address: 6334 OAK MEADOW BEND
City-St-Zip: ORLANDO, FL 32819

Title: P
Name: BEGIN, REGINALD
Address: 5300 S ATLANTIC AVENUE #12605
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D
Name: DEFEO, NANCY
Address: 5300 S ATLANTIC AVE UNIT #12502
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP
Name: KEMPER, SCOTT
Address: 2245 EAST HAYES STREET
City-St-Zip: INVERNESS, FL 34453

Title: SEC
Name: SCHILLING, PETER
Address: 5300 S ATLANTIC AVE UNIT #12403
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby 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 all other like empowered.

SIGNATURE: ROBERT DEL ROSE

RA

04/16/2012

Electronic Signature of Signing Officer or Director

Date