2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N09605

1. Entity Name



FILED Mar 13, 2006 8:00 am Secretary of State 03-13-2006 90060 021 ****61.25

BEACH, I	E CONDOMINIUM ASSOCIAT NC.	ION OF ORMOND			Ü	15 2000 30000	J 2 1 01	.23
2294 OCEAN SHORE BLVD 2		Mailing Address 2294 OCEAN SHORE BLVD. ORMOND BEACH, FL 32176			I (BRIUM) AN ANGIA	*. 4	: SIG11 81St: AIG11 81T	
2. Principal Place of Business 3. M		3. Mailing Address	lailing Address					
					1 14471141 411 88114	121.5 2411 2012. Chi Cilili 242.1	51211 51611 E1511 512	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01122006 Ct	ng-NP CR2E	E037 (11/05)	
City & State		City & State			4. FEI Number 59-258035	0	 	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of St	atus Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current Re	gistered Agent			7. Name and Add	ress of New Registers	d Agent	
			Name					
	N AN SHORE BLVD #402 BEACH, FL 32176		Street Address (P.O. Box Number is Not Ad			Not Acceptable)		
			City			F	Zip Cod	le
	named entity submits this statement for thions of registered agent.	e purpose of changing its	registered office of	r register	ed agent, or both, in	the State of Florida. I a	ım familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent and	title if applicable. (NOTE	: Registered Agent signat	ure required	when reinstating)	DAT		
	1.							
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Carr Trust Fund C	npaign Financing contribution.		\$5.00 May Be Added to Fees		eck payable to partment of Si	
10.	OFFICERS AND DIREC	TORS	11.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	l 10
TITLE	RS	☐ Defete	TITLE	D			Change	☐ Addition
NAME STREET ADDRESS	BOORD, BILLY 2294 OCEAN SHORE BLVD., #502		NAME STREET ADDRESS					
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP					
TITLE	P	DNQelete	ΠLE	ρ		_	☐ Change	Addition
NAME	STONER, ELIZABETH	•	NAME	DE 4	LISLE, JOI	S FORE BLUD. F	u 70.	
STREET ADDRESS	2294 OCEAN SHORE BLVD., #204		STREET ADDRESS	239	OCEAN SI	HORE BLVD. +	# 303 /	
CITY-ST-ZIP	ORMOND BEACH, FL 32176	·	CITY-ST-ZIP		OND DEAL	H, FL 321		
TITLE	CS .	☐ Delete	TITLE	S			Change	Addition
NAME STREET ADDRESS	STITH, RICHARD 2294 OCEAN SHORE BLVD., #506		name Street address					
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP	-	•			
TITLE	V	Delete	TITLE	V			☐ Change	☐ Addition
NAME	MCDADE, ROBERT	•	NAME	SIL	VEIRA, R	LANDING L) a C	
STREET ADDRESS	2294 OCEAN SHORE BLVD., #305		STREET ADDRESS	345	CYPRESS	LANDING		
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP	LON	GWOOD, F	L 32779		
TITLE	T HILL, JEAN	☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS	2294 OCEAN SHORE BLVD., #402		NAME STREET ADDRESS					
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE	 			☐ Change	Addition
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	L			<u> </u>	
12. I hereby of indicated	certify that the information supplied with this on this report or supplemental report is true	s filing does not qualify for	the exemptions on signature shall h	ontained	in Chapter 119, Flor same legal effect as	ida Statutes. I further of	ertify that the in	nformation r or director

noncined on this report of supporting report is true and accurate and that it 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:	Jean
	SEMATURE AND 1

W HILL JEAN HILL
TYPED OR PRINTED HAME OF BIGHING OFFICER OR DIRECTOR

3-6-06

386-441-7600 Daytime Phone #