

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16188

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: OCEAN WATCH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2700 OCEANSHORE BLVD  
ORMOND BEACH, FL 32176

**New Principal Place of Business:**

**Current Mailing Address:**

2700 OCEANSHORE BLVD  
ORMOND BEACH, FL 32176

**New Mailing Address:**

FEI Number: 59-2703575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOSIMANN, GERALD  
2700 OCEAN SHORE BLVD #208  
ORMOND BEACH, FL 32176 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: P ( ) Delete  
Name: PROPST, KENNETH  
Address: 120 MONROE STREET  
City-St-Zip: ARCHBALD, PA 18403

Title: ST ( ) Delete  
Name: TURNER, NANCY  
Address: 225 LEWIS RD  
City-St-Zip: STOCKBRIDGE, GA 30281

Title: D ( ) Delete  
Name: HICKEY, GERRI  
Address: 50 GROVE AVE  
City-St-Zip: ROCHELLE PARK, NJ 07662

Title: V ( ) Delete  
Name: MOSIMANN, GERALD  
Address: 278 ATWOOD RD.  
City-St-Zip: THOMASTON, CT 06787

Title: D ( ) Delete  
Name: POGGIONE, APRIL  
Address: 5084 BLACKNELL LN  
City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete  
Name: EDMONDWSON, TRAVIS  
Address: 14435 CO. RD. 87  
City-St-Zip: WOODLAND, AL 36280

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KENNETH PROPST

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date