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Mar 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N24937 (7)

OCEAN ISLE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 2910 S.E. DUNE DRIVE, STUART FL 34996
Mailing Address: 2910 S.E. DUNE DRIVE, STUART FL 34996-1992

3. Date Incorporated or Qualified: 02/22/1988
3a. Date of Last Report: 04/10/1996

2. Principal Place of Business: 21
2a. Mailing Address: 26

4. FEI Number: 65-0097997
Applied For: Not Applicable

Suite, Apt. #, etc.: 22
Suite, Apt. #, etc.: 27

5. Certificate of Status Desired: \$8.75 Additional Fee Required

City & State: 23
City & State: 28

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

Zip: 24
Country: 25
Zip: 29
Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BODEM, LOREN MR.
815 COLORADO AVENUE
STUART FL 34994

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: P
NAME: AWAD-YOCOM, JACQUELINE
STREET ADDRESS: 2910 SE DUNE DR
CITY-ST-ZIP: STUART FL

1.1 TITLE: DIRECTOR
1.2 NAME: MANNER, SUSAN
1.3 STREET ADDRESS: 2910 SE DUNE DR
1.4 CITY-ST-ZIP: STUART, FL 34996

TITLE: TD
NAME: COSTER, EDWARD
STREET ADDRESS: 2910 SE DUNE DR
CITY-ST-ZIP: STUART FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE: SD
NAME: ORR, JANET
STREET ADDRESS: 2910 SE DUNE DR
CITY-ST-ZIP: STUART FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE: D
NAME: CHILDRESS, LINWOOD
STREET ADDRESS: 2910 SE DUNE DR
CITY-ST-ZIP: STUART FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE: D
NAME: LUTZ, RICHARD
STREET ADDRESS: 2910 SE DUNE DR
CITY-ST-ZIP: STUART FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. Edward Livingston Coster

SIGNATURE: _____ DATE: 3/24/97

CR2E037 (9/96)

561-225-2900