

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24937

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: OCEAN ISLE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2910 S.E. DUNE DRIVE  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

2910 S.E. DUNE DRIVE  
STUART, FL 34996

**New Mailing Address:**

FEI Number: 65-0097997

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KAZMIER, TIMOTHY D.  
2177 SE OCEAN BLVD  
STUART, FL 34996 US

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

KAZMIER, TIMOTHY D MGR  
2177 SE OCEAN BLVD  
STUART, FL 34996 US

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: TIMOTHY D. KAZMIER

04/22/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COYNE, DALE  
Address: 2910 S.E. DUNE DR.  
City-St-Zip: STUART, FL 34996

Title: SD ( ) Delete  
Name: MC CARNEY, JOHN  
Address: 2910 SE DUNE DR  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: SEAMAN, MORT  
Address: 2910 SE DUNE DRIVE  
City-St-Zip: STUART, FL 34996

Title: TD ( ) Delete  
Name: KAPLAN, JAY  
Address: 2910 SE DUNE DR  
City-St-Zip: STUART, FL 34996

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

Title: VPD (X) Change ( ) Addition  
Name: SEAMAN, MORT  
Address: 2910 SE DUNE DRIVE  
City-St-Zip: STUART, FL 34996

Title: TD (X) Change ( ) Addition  
Name: KING, DOUGLAS  
Address: 2910 SE DUNE DR  
City-St-Zip: STUART, FL 34996

Title: D ( ) Change (X) Addition  
Name: KANE, CHARLES  
Address: 2910 SE DUNE DR  
City-St-Zip: STUART, FL 34996

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: TIMOTHY D. KAZMIER

MGR

04/22/2009

Electronic Signature of Signing Officer or Director

Date