

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27890

FILED  
Mar 05, 2008  
Secretary of State

**Entity Name:** OCEANIQUE II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2105 HIGHWAY A1A  
INDIAN HARBOUR BEACH, FL 32937

**New Principal Place of Business:**

**Current Mailing Address:**

2105 HIGHWAY A1A  
INDIAN HARBOUR BEACH, FL 32937

**New Mailing Address:**

**FEI Number:** 59-2913187

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOLAN, TIMOTHY E  
460 SAILFISH COVE  
INDIAN HARBOUR BEACH, FL 32937 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: DT ( ) Delete  
Name: TAETZSCH, WILLIAM  
Address: 16 AUTUMN LANE  
City-St-Zip: WEST SAND LAKE, NY 12196

Title: DP ( ) Delete  
Name: MCKAY, CRAIG  
Address: 11139 RICH MEADOW DRIVE  
City-St-Zip: GREAT FALLS, VA 22066

Title: S ( ) Delete  
Name: NOLAN, TIMOHTY  
Address: 460 SAILFISH COVE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: DV ( ) Delete  
Name: PALMER, SHELDON  
Address: 126 MONET BLVD  
City-St-Zip: WINCHESTER, KY 40391

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

Title: DT (X) Change ( ) Addition  
Name: WILANSKY, JOHN  
Address: 1026 ASHLEY AVE  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: TIMOTHY NOLAN

S

03/05/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date