

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 15, 2006 8:00 am
Secretary of State

05-15-2006 90042 009 ***150.00

DOCUMENT # N29328

1. Entity Name

OCEAN TERRACE BEACHSIDE CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business

4564 EL MAR DRIVE

LAUDERDALE-BY-THE-SEA, FL 33308

Mailing Address

C/O HICKOKE SUPERTY, PA
2600 E COMMERCIAL BLVD, STE 201 B
FORT LAUDERDALE, FL 33308 US

40096137



04212006 No Chg-NP

CR2E037 (11/05)

4. FEI Number
65-0190886

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MULLEN, JOSEPH P.
2929 E COMMERICAL BLVD
PH C
FT. LAUDERDALE, FL 33308

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

NOTED
05/08/06-80013-008 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
PIETRONUTO, JOHN
4564 EL MAR DR
LAUDERDALE BY THE SEA, FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
MILZOW, FOREST
25 S MAIN ST
CLARKSTON, MI 48346

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
TOSCANO, CARMEN F
1761 SALEM ST
NORTH ANDOVER, MA 01845

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-2006

Date

Daytime Phone #