


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N30602 1. Entity Name OCEANVIEW CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 115 BAMBOO ROAD #108 PALM BEACH SHORES, FL 33404	Mailing Address 115 BAMBOO ROAD #108 PALM BEACH SHORES, FL 33404
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DO NOT WRITE IN THIS SPACE



01152007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0176158	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NIELAND, JACK
115 BAMBOO ROAD
#108
PALM BEACH SHORES, FL 33404

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

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NIELAND, JACK 115 BAMBOO ROAD, APT #108 PALM BCH SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHEA, CHRISTOPHER 115 BAMBOO ROAD, APT #108 PALM BCH SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SULLIVAN, MAGGIE 115 BAMBOO ROAD, #207 PALM BCH SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIELAND, RICHARD 115 BAMBOO ROAD, #204 PALM BCH SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIELAND, JULIETTE 115 BAMBOO ROAD, #201 PALM BCH SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/01/07-80032-024 70.00

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: Jack Nieland (JACK NIELAND) **4/19/07** (561)848-1555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #