

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33514

FILED
May 08, 2007
Secretary of State

Entity Name: 2000 NORTH OCEAN DRIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2000 NORTH OCEAN DRIVE
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

2000 NORTH OCEAN DRIVE
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 65-0176981 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PROULX, CLEMENT
2000 N. OCEAN DRIVE
APT. 105
HOLLYWOOD, FL 33019 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: PD () Delete
Name: MAINVILLE, CLAUDE
Address: 2000 NORTH OCEAN DRIVE, APT. 107
City-St-Zip: HOLLYWOOD, FL 33019

Title: VPD () Delete
Name: PROULX, CLEMENT
Address: 2000 NORTH OCEAN DRIVE, APT. 105
City-St-Zip: HOLLYWOOD, FL 33019

Title: ST () Delete
Name: PARENTEAU, PAUL-EMILE
Address: 2000 NORTH OCEAN DRIVE, APT. 106
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEVERS, WILLIAM
Address: 2000 NORTH OCEAN DRIVE, APT. 107
City-St-Zip: HOLLYWOOD, FL 33019

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: CLEMENT PROULX

VPD

05/08/2007

Electronic Signature of Signing Officer or Director

Date