2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33949

FILED Mar 16, 2007 Secretary of State

Entity Name: OCEAN POINTE V CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

500 BURTON DRIVE TAVERNIER, FL 33070

Current Mailing Address: New Mailing Address:

500 BURTON DRIVE 107 HAMPTON ROAD TAVERNIER, FL 33070 SUITE 100 CLEARWATER, FL 33759

FEI Number: 65-0169473 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PROVIDENT ATLANTIC RESORTS INC. 107 HAMPTON ROAD SUITE 100 CLEARWATER, FL 337593916 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:

- Flateric Circular (Davidson | Annal

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: () Change () Addition

 Name:
 HORRIGAN, MICHAEL
 Name:

 Address:
 500 BURTON DRIVE #5306
 Address:

 City-St-Zip:
 TAVERNIER, FL 33070
 City-St-Zip:

Title: VD () Delete Title: STD (X) Change () Addition Name: TABBERT, WILLIAM Name: TABBERT, WILLIAM

 Address:
 500 BURTON DRIVE #5307
 Address:
 500 BURTON DRIVE #5307

 City-St-Zip:
 TAVERNIER, FL 33070
 City-St-Zip:
 TAVERNIER, FL 33070

Title: STD () Delete Title: VPD (X) Change () Addition

Name: BIRREN, CHRISTOPHER Name: BIRREN, CHRISTOPHER

 Address:
 1554 MAPLE AVE.

 City-St-Zip:
 NORTHBROOK, IL 600625475

 Address:
 1554 MAPLE AVE.

 City-St-Zip:
 NORTHBROOK, IL 600625475

I hereby certify that the information supplied with this filing does not qualify for the 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: M SUE DOBSON AGT 03/16/2007