2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36674

FILED Apr 30, 2008 Secretary of State

Entity Name: OCEAN QUEEN TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O CHRISTOPHER J. RYAN, ESQ. 700 EAST DANIA BEACH BLVD. **DANIA, FL 33004 Current Mailing Address: New Mailing Address:** C/O CHRISTOPHER J. RYAN, ESQ. 700 EAST DANIA BEACH BLVD. **DANIA, FL 33004** FEI Number: 65-0352290 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: RYAN, CHRISTOPHER J 700 EÁST DANIA BEACH BLVD. DANIA, FL 33004 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: STD () Delete () Change () Addition MANFREDI, SANDRA Name: Name: 312 OAK STREET Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change () Addition FORES, JESSE Name: COHAN, EUGENE Name: Address: 304 OAK STREET Address: 314 OAK STREET City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: HOLLYWOOD, FL 33019 Title: () Delete Title: () Change () Addition SOUTAR, JOHN Name: Name: Address: 312 OAK STREET Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: () Delete Title: Title: VPD () Change (X) Addition Name: Name: SELWAY, DAVID Address: Address: 310 OAK STREET City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33019

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: JOHN SOUTAR PD 04/30/2008