

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41384

FILED  
May 01, 2007  
Secretary of State

Entity Name: VILLAS OF OCEAN CREST HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2115 S OCEAN BLVD.  
APT. #1  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

43 SOUTH POMPANO PARKWAY  
273  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

60 VENETIAN DRIVE  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 54-1510535      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:**

SERGIO'S PROPERTY MGT, INC.  
60 VENETIAN DRIVE  
DELRAY BEACH, FL 33403      US

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

PERSONAL PROPERTY MANAGEMENT, INC.  
43 SOUTH POMPANO PARKWAY  
273  
POMPANO BEACH, FL 33069      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: ROBERT ANDREWS

05/01/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD      ( ) Delete  
Name: RICHMAN, MAXINE  
Address: 2115 S OCEAN BLVD, #4  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD      ( ) Delete  
Name: KOTLER, MICHAEL  
Address: 2115 S OCEAN BLVD, # 15  
City-St-Zip: DELRAY BEACH, FL 33483

Title: PTD      ( ) Delete  
Name: MACALEER, KATE  
Address: 2115 S. OCEAN BLVD #5  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD      (X) Change ( ) Addition  
Name: POSOVSKY, STEVEN  
Address: 2115 S OCEAN BLVD, #1  
City-St-Zip: DELRAY BEACH, FL 33483

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: KATE MACALEER

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date