

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42202

FILED  
Jan 18, 2005  
Secretary of State

**Entity Name:** OCEAN PLACE ESTATES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4401 S OCEAN BLVD  
OCEAN PLACE ESTATES  
HIGHLAND BEACH, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

10 OCEAN PLACE  
HIGHLAND BEACH, FL 33487

**New Mailing Address:**

**FEI Number:** 65-0352563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KNEEN, JEFFREY D  
1400 CENTRE PARK BOULEVARD  
SUITE 1000  
WEST PALM BEACH, FL 33401 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: CROWLEY, ANA  
Address: 9 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: SD ( ) Delete  
Name: FAWZI, FRANK  
Address: 8 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: TD ( ) Delete  
Name: UURANNIEMI, TUULA  
Address: 10 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D (X) Delete  
Name: HILLIARD, BARBARA  
Address: 7 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D (X) Delete  
Name: SPAIN, BERNARD  
Address: 5 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

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

Title: PTD (X) Change ( ) Addition  
Name: UURANNIEMI, TUULA  
Address: 10 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: SD (X) Change ( ) Addition  
Name: FAWZI, LOUISE  
Address: 8 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D (X) Change ( ) Addition  
Name: SPAIN, BERNARD  
Address: 5 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

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 for the exemption stated in Section 119.07(3)(i), 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: TUULA UURANNIEMI

PTD

01/18/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date