

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45037

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** OCEANSIDE AT SUMMER BEACH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

463499 STATE ROAD 200  
YULEE, FL 32097 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1987  
YULEE, FL 320411987 US

**New Mailing Address:**

**FEI Number:** 59-3100540

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PROPERTY MANAGEMENT SYSTEMS INC  
463499 STATE ROAD 200  
YULEE, FL 32097 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: P/D ( ) Delete  
Name: SANDS, JAMES U  
Address: 5456 FIRST COAST HIGHWAY  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: STD ( ) Delete  
Name: KORSOG, KEITH  
Address: 5456 FIRST COAST HIGHWAY  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: D ( ) Delete  
Name: SZEP, TONY  
Address: 4921 SUMMER BEACH BOULEVARD  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

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

Title: P/D (X) Change ( ) Addition  
Name: JONES, LEON  
Address: 4962 SUMMER BEACH BOULEVARD  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: V/D (X) Change ( ) Addition  
Name: MCLEOD, LAURA  
Address: 4983 SUMMER BEACH BOLUEVARD  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: STD (X) Change ( ) Addition  
Name: LARABEE, LINDA M  
Address: 4958 SUMMER BEACH BOULEVARD  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

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: TERRELL J POWELL

RA

04/25/2007

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

\_\_\_\_\_  
Date