## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED **Secretary of State**

## Jul 12, 2004 8:00 am 07-12-2004 90014 008 \*\*\*\*61.25

**DOCUMENT # N96000006290** OCEÁN WAY VILLAS HOMEOWNERS' ASSOCIATION. INC. Mailing Address Principal Place of Business 44047893 832 SE 20TH AVE **832 SE 20TH AVE** DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 07072004 Cha-NP CR2E037 (10/03) Applied For City & State 4. FEI Number City & State 65-0885097 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ~6.∈Name and Address of Current Registered Agent -Name HARRIS, ROBERT G Street Address (P.O. Box Number is Not Acceptable) 530 SOUTH FEDERAL HIGHWAY #201 DEERFILED BEACH, FL 33441 Zin Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing **\$5.00** May Be Make check payable to Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by September 8, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE ZIELINSKI, RAYMOND NAME NAME STREET ADDRESS 832 SE 20TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH, FL 33441 Change ☐ Addition ☐ Delete TIT! F TITLE ZIELINSKI, DEBORAH 332 SE ZO RYE DEERFIELD BEACH, FL 33441 ZIELINSKI, DEBORAH NAME NAME STREET ADDRESS 832 SE 20TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH, FL 33441 TO ☐ Change Addition 🗶 Delete TITLE TITLE ROYDAN ROWLAND 834 SE 20TH AVE ZIELINSKI, PETER NAME NAME **732 SE 20TH AVE** STREET ADDRESS STREET ADDRESS DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete 50 ☐ Channe ☐ Addition TITLE TITLE KATY ROWLAND NAME NAME 834 SE 20TH AVE STREET ADDRESS STREET ADDRESS DEERFIELD BEACH, FL 33441 CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

☐ Delete

SIC	GN/	<b>ATU</b>	RE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

16 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 964-428*-2341* 

☐ Change

☐ Addition

Daytime Phone #