2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002537

FILED Apr 25, 2007 Secretary of State

Entity Name: OCEAN PLACE AT SUMMER BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 463499 STATE ROAD 200 YULEE, FL 32097 US **Current Mailing Address: New Mailing Address:** PO BOX 1987 YULEE, FL 320411987 US FEI Number: 59-3446596 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: PROPERTY MANAGEMENT SYSTEMS INC 463499 STATE ROAD 200 YULEE, FL 32097 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: () Delete () Change () Addition WALDORF, TOM Name: Name: 4776 AMELIA ISLAND PARKWAY #39 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 US City-St-Zip: Title: V/D () Delete Title: (X) Change () Addition TOUHY, JIM Name: TOUHY, JIM Name: Address: 4776 AMELIA ISLAND PARKWAY #21 Address: 4776 AMELIA ISLAND PARKWAY #21 City-St-Zip: FERNANDINA BEACH, FL 32034 US City-St-Zip: FERNANDINA BEACH, FL 32034 US Title: STD () Delete Title: () Change () Addition SANTA MARIA, BERNIE Name: Name: 4776 AMELIA ISLAND PARKWAY #25 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 US City-St-Zip: (X) Change () Addition Title: D Title: () Delete TREVARTHEN, JUDITH Name: BROOKS, LEO Name: 4776 AMELIA ISLAND PARKWAY #72 4776 AMELIA ISLAND PARKWAY #101 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 US City-St-Zip: FERNANDINA BEACH, FL 32034 US Title: () Delete Title: (X) Change () Addition MILTON, MEG MILTON, WALT Name: Name: 4776 AMELIA ISLAND PARKWAY #35 4776 AMELIA ISLAND PARKWAY #35 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 US 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