

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005975

FILED  
Apr 11, 2011  
Secretary of State

**Entity Name:** OCEANFRONT PARTNERSHIP CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3425 N ATLANTIC AVE  
COCOA BCH, FL 32931

**New Principal Place of Business:**

**Current Mailing Address:**

3425 N ATLANTIC AVE  
COCOA BCH, FL 32931

**New Mailing Address:**

**FEI Number:** 59-3488605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BJERNING, EUGENE K  
3425 N ATLANTIC AVE  
COCOA BCH, FL 32931 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  
Name: DOBSON, ROGER  
Address: 6245 S. TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: STD  
Name: BJERNING, GENE  
Address: 6245 S. TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD  
Name: HERMANSEN, BJORNAR  
Address: 205 HACIENDA DR  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PD  
Name: HERMANSEN, TOM C  
Address: 3425 N ATLANTIC AVE  
City-St-Zip: COCOA BCH, FL 32931

I hereby 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 all other like empowered.

SIGNATURE: TOM C. HERMANSEN

P

04/11/2011

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

\_\_\_\_\_  
Date