

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002770

FILED  
Mar 16, 2010  
Secretary of State

**Entity Name:** OCEAN WALK AT NEW SMYRNA BEACH PHASE I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 W SR 434  
STE 5000  
LONGWOOD, FL 327795044

**New Principal Place of Business:**

**Current Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Mailing Address:**

**FEI Number:** 59-3650347

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, JAMES W JR.  
SENTRY MANAGEMENT INC  
2180 W SR 434, SUITE 5000  
LONGWOOD, FL 327795044 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: BIRDSALL, EDGAR  
Address: 5300 S ATLANTIC AVE #1307  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: SD  
Name: WILSON, BARBARA  
Address: 5300 S ATLANTIC AVE #1504  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D  
Name: HALL, RONALD  
Address: 5300 S ATLANTIC AVE #1601  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D  
Name: SHOCKEY, DEBRA  
Address: 7152 OLD LANTERN DR  
City-St-Zip: CALEDONIA, MI 49316

Title: TD  
Name: ROSEDALE, RICHARD  
Address: 5300 S ATLANTIC AVE #1605  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD  
Name: RYAN, BILLY JR  
Address: 5300 S ATLANTIC AVE #1507  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: EDGAR BIRDSALL

PD

03/16/2010

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

\_\_\_\_\_  
Date