

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006297

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: OCEANVIEW VILLAS ASSOCIATION, INC.

## Current Principal Place of Business:

404 SOUTH MIRAMAR AVENUE  
INDIALANTIC, FL 32903

## New Principal Place of Business:

## Current Mailing Address:

404 SOUTH MIRAMAR AVENUE  
UNIT #3  
INDIALANTIC, FL 32903

## New Mailing Address:

FEI Number: 65-0957562      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MOSLEY, CURTIS R ESQ.  
1221 EAST HAVEN AVENUE  
MELBOURNE, FL 32901 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: VD ( ) Delete  
Name: WHITNEY, RYAN  
Address: 404 S. MIRAMAR AVE, UNIT #2  
City-St-Zip: INDIALANTIC, FL 32903

Title: PMD ( ) Delete  
Name: HEATON, PETER  
Address: 404 SOUTH MIRAMAR AVENUE UNIT 3  
City-St-Zip: INDIALANTIC, FL 32903

Title: TSCD ( ) Delete  
Name: HEATON, LAURA E  
Address: 404 SOUTH MIRAMAR AVENUE UNIT 3  
City-St-Zip: INDIALANTIC, FL 32903

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: HEATON, PETER  
Address: 404 SOUTH MIRAMAR AVENUE UNIT 3  
City-St-Zip: INDIALANTIC, FL 32903

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M ( ) Change (X) Addition  
Name: CANTOS, CESAR  
Address: 404 SOUTH MIRAMAR AVENUE UNIT 1  
City-St-Zip: INDIALANTIC, FL 32903

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: LAURA E. HEATON

D

01/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date