2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000077107

Entity Name: OCEANFRONT NSB. INC.

FILED Mar 31, 2009 Secretary of State

| Littley Hai | iic. OOLAN | NONT NOD, INC. | | | |
|---|--|----------------------------------|--------------|--|--------------------------------------|
| Current Principal Place of Business: | | | | New Principal Place of Business: | |
| 1890 KENTUCKY AVENUE WINTER PARK, FL 32789 | | | | 1110 KEYES AVENUE WINTER PARK, FL 32789 | |
| Current Mailing Address: | | | | New Mailing Address: | |
| PO BOX 12 WINTER F | 25 PARK, FL 327 | 90 | | | |
| FEI Number: | 26-0472462 | FEI Number Applied For() | FEI Numbe | er Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | |
| MCCUE, CHARLY 1890 KENTUCKY AVENUE WINTER PARK, FL 32789 US | | | | ICCUE, CHARLY 046 SEABRIDGE DR PRLANDO, FL 32839 | US |
| | named entity e of Florida. | submits this statement for the p | purpose of c | changing its registered | office or registered agent, or both, |
| SIGNATURE: CHARLY MCCUE | | | | 03/31/2009 | |
| | Electron | nic Signature of Registered Ag | ent | | Date |
| Election Can | npaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | Α | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P/D (TORRUELLA, 1 PO BOX 125 WINTER PARK | | Na Ad | itle: (ame: ddress: ity-St-Zip: | () Change() Addition |
| Title: Name: Address: City-St-Zip: | S (MCCUE, CHAR PO BOX 125 WINTER PARK | | Na Ad | itle: (ame: ddress: ity-St-Zip: |)Change ()Addition |

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TANIA M. TORRUELLA P 03/31/2009