

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000032788

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: OCEANNA SANDS INVESTMENTS, INC.

**Current Principal Place of Business:**

603 DOGWOOD STREET  
PANAMA CITY BEACH, FL 32407

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9872  
PANAMA CITY BEACH, FL 32417

**New Mailing Address:**

FEI Number: 74-3047881

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALLAN, SHER L ATTY  
731 OAK AVENUE  
PANAMA CITY, FL 32401 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: CASTELLI, ANDREA PRES.  
Address: 603 DOGWOOD STREET  
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: VS ( ) Delete  
Name: CASTELLI, ELIZABETH SEC.  
Address: 603 DOGWOOD STREET  
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: VP ( ) Delete  
Name: STEWART, MARGARET VP  
Address: 605 DOGWOOD ST.  
City-St-Zip: PANAMA CITY BEACH, FL 32407

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: ELIZABETH CASTELLI

SEC

03/16/2009

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

\_\_\_\_\_  
Date