


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90175 017 \*\*\*\*61.25

**DOCUMENT # 712233**  
 1. Entity Name  
 TALL OCEAN BEACH CONDOMINIUM APTS., INC.



00000010



Principal Place of Business  
 755 OCEAN DR WEST  
 KEY COLONY BEACH, FL 33051

Mailing Address  
~~2 SPRING LAKE BLVD~~  
~~WARETOWN, NJ 08758 US~~

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 8085 OVERSEAS HWY  
 Suite, Apt. #, etc.

City & State  
 MARATHON, FL

City & State  
 MARATHON, FL

Zip  
 33050

Country  
 USA

01252008 Chg-NP CR2E037 (12/06)

4. FEI Number  
 NOT APPLICABLE

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 STOHL, STEPHEN A.  
 755 OCEAN DR W  
 KEY COLONY BCH, FL 33051

7. Name and Address of New Registered Agent  
 Name: BISHOP, ROSASLO & Co. DONNA M HOEKMAN C PA  
 Street Address (P.O. Box Number is Not Acceptable):  
 8085 OVERSEAS HWY  
 City: MARATHON FL Zip Code: 33050

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* C PA DATE: 4/18/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SMITH, GEORGE 755 OCEAN DR, WEST KEY COLONY BEACH, FL 33051	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT/DIRECTOR MELVIN, STEPHEN 755 W. OCEAN DR. KEY COLONY BEACH, FL 33051	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STOHL, STEPHEN A. 755 OCEAN DR WEST KEY COLONY BEACH, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE-PRESIDENT/DIRECTOR MOLINA, MARINO 121 BALFOUR DR. BAL HARBOUR, FL 33154	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD DUNN, CHRISTOPHER 2 SPRINGS LAKE BLVD WARETOWN, NJ 08758	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY-TREASURER/DIRECTOR MATTI, WALTER 1407 JUMANA LOOP APOLLO BEACH, FL 33512	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD JUVE, MARILYN 755 OCEAN DRIVE. WEST KEY COLONY BEACH, FL 33051	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD ROSLAN, JOHN 755 OCEAN DR. WEST KEY COLONY BEACH, FL 33051	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with another like empowered.

SIGNATURE: *[Signature]* STEPHEN MELVIN DATE: 4/18/08 305 743-5173

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #