2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # 721282 May 09, 2000 8:00 am Secretary of State 1. Entity Name OCEAN PALM VILLA ASSOCIATION, INC. 04-04-2000 90093 016 ****61.25 Mailing Address Principal Place of Business 282 OCEAN PALM VILLAS N #D OCEAN PALM VILLAS NORTH FLAGLER BEACH FL 32136-4113 FLGLER BEACH FL 32136 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-1396711 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ddress (P.O. Box Number is Not Acceptable) OCEAN PALM VILLAS NORTH SCARDINO, RUTH 282 OCEAN PALM DR N #10 FLGLER BEACH FL 32136 CHYFLAGLER BEACH 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. Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ■ Addition Change TITLE TITLE Delete NAME HUFFINGS, ROBERT NAME SAME STREET ADDRESS STREET ADDRESS 3 OCEAN PALM VILLA N CITY-ST-ZIP CITY-ST-7/P FLGLER BEACH FL 32136 VIACINIA Burgataller TOCEAN PALM VILLAS NORTH Change ☐ Addition Delete TITLE SD TITLE NAME West, Karen NAME STREET ADDRESS STREET ADDRESS 21 OCEAN PALM VILLA N <u>Flacier Beach, FL 32136</u> CITY-ST-ZIP CITY-ST-ZIP FLGLER BEACH FL M Change ☐ Addition M Dalete TITLE Dronald Nicely TITLE 26 OCEAN PALM VILLAS HORTH MAIER, TERESA NAME STREET ADDRESS STREET ADDRESS 40 OCEAN PALM DR N FLACLER BEACH, FL 32136 CITY-ST-ZIP CITY-ST-ZIP FLGLER BEACH FL 32136 Addition TITLE Delete TIME MARY LOU PAPE 18 OCEAN PALM VILLAS NORTH PAPE, MARY LOU NAME NAME STREET ADDRESS STREET ADDRESS 18 OCEAN PALM VILLA N FLAGLER BEACH PL 32136 CITY-ST-ZIP CITY-ST-ZIP FLGLER BEACH FL 32138 ☐ Addition TITLE 🛂 Delete TITLE jgmunt OBRYS Tr. SCARDINO, RUTH NAME NAME 8 OCOAN PALM VILLAS WATH STREET ADDRESS STREET ADDRESS 10 OCEAN PALM DR N AGLER BENCH, FL CITY-ST-ZIP CITY-ST-ZIP FLGLER BEACH FL 32136

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 path; that I am an officer or director of the opporation 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 all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-2IP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-SI-ZIP

SIMON FOR PAINTED HAME OF JOHNS OFFICER OR DIRECTOR

Delete

March 30, 1000 Daysina

(904) 439-02

☐ Addition