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**Apr 09, 1999 8:00 am**  
**Secretary of State**

04-09-1999 90035 046 \*\*\*\*61.25

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 753141**

1. Corporation Name

**OCEAN REEF FISHERMAN'S COVE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

31 OCEAN REEF DR  
SUITE A-200  
KEY LARGO FL 33037  
US

Mailing Address

31 OCEAN REEF DR  
SUITE A-200  
KEY LARGO FL 33037  
US

311852 - 90035 - 46



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

06/26/1980

4. FEI Number

59-2199233

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

FEELEY, JOHN J  
111 FOUNTAINBLEAU BLVD  
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME FRESHLEY, RONALD DR  
STREET ADDRESS 31 OCEAN REEF DR, #A-200  
CITY-ST-ZIP KEY LARGO F 33037

TITLE TD ☐ DELETE

NAME LONDON, WILLIAM  
STREET ADDRESS 31 OCEAN DR, #A-200  
CITY-ST-ZIP N. KEY LARGO FL 33037

TITLE D ☒ DELETE

NAME MESSINA, FRED  
STREET ADDRESS 31 OCEAN REEF DR, #A-200  
CITY-ST-ZIP N. KEY LARGO FL 33037

TITLE D ☐ DELETE

NAME GEPHART, BRENT  
STREET ADDRESS 31 OCEAN REEF DR, #A-200  
CITY-ST-ZIP KEY LARGO FL 33037

TITLE VD ☐ DELETE

NAME VINCUNAS, RAY  
STREET ADDRESS 31 OCEAN REEF DR, #A-200  
CITY-ST-ZIP N. KEY LARGO FL 33037

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Ronald Freshley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/99 305-367-1090  
Date Daytime Phone #

CR2E037 (1/98)