

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90560 020 ****61.25

DOCUMENT # N44216

1. Entity Name

1500 OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1500 N. OCEAN BLVD.
POMPANO BEACH FL 33062
US

Mailing Address

1500 N. OCEAN BLVD.
POMPANO BEACH FL 33062
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0235506

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIFFORD, ROLAND
1500 N OCEAN BLVD
31405
POMPANO BEACH FL 33062

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE PD
NAME GIFFORD, ROLAND ☐ Delete
STREET ADDRESS 1500 N. OCEAN BLVD. #405
CITY-ST-ZIP POMPANO BCH FL 33062

TITLE VPD
NAME ROBBINS, ROSE ☒ Delete
STREET ADDRESS 1500 N. OCEAN BLVD. #601
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE SD
NAME COX, RICK ☒ Delete
STREET ADDRESS 1500 N. OCEAN BLVD. #205
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE SD
NAME WOODSTOCK, DENISE ☒ Delete
STREET ADDRESS 1500 N. OCEAN BLVD. #602
CITY-ST-ZIP POMPANO BCH FL 33062

TITLE T
NAME MILLER, REGEN ☒ Delete
STREET ADDRESS 1500 N OCEAN #503
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☒ Change ☐ Addition
NAME LAHR, JAMES E
STREET ADDRESS 1500 N. OCEAN BLVD #605
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE SD ☒ Change ☐ Addition
NAME FRITTS, JAMES L
STREET ADDRESS 1500 N OCEAN BLVD #204
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Change ☐ Addition
NAME MILLER, LANCE
STREET ADDRESS 1500 N OCEAN BLVD #503
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #