

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704972

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** OCEANSIDE GOLF AND COUNTRY CLUB, INC.

**Current Principal Place of Business:**

75 NORTH HALIFAX AVENUE  
ORMOND BCH, FL 32176 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 367  
ORMOND BCH, FL 32175 US

**New Mailing Address:**

**FEI Number:** 59-1004935

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HASKELL, THOMAS A  
75 N HALIFAX DRIVE  
ORMOND BEACH, FL 32176 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHODER, ANTHONY JR.  
Address: 2300 N. ATLANTIC AVE #102  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VPD  
Name: LOUCKS, WILLIAM  
Address: 410 RIVERSIDE DR  
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD  
Name: BANKER, RICK  
Address: 64 COUNTRY CLUB DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

Title: TD  
Name: GRANT, CHARLES  
Address: 150 NORTH BEACH STREET  
City-St-Zip: ORMOND BEACH, FL 32174

Title: D  
Name: KULZER, MICHAEL  
Address: 325 RIVERSIDE DR  
City-St-Zip: ORMOND BEACH, FL 32176

Title: D  
Name: KENNEDY, DENISE  
Address: 1236 KILLARNEY DR.  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY SCHODER

PD

04/19/2011

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

\_\_\_\_\_  
Date