

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708714

Entity Name: OCEAN TERRACE BEACH CLUB, INC.**Current Principal Place of Business:**

% MICHAEL J. GELFAND, ESQ.
1555 PALM BEACH LAKES BLVD, SUITE 1220
WEST PALM BEACH, FL 33401-2329

Current Mailing Address:

% MICHAEL J. GELFAND, ESQ.
1555 PALM BEACH LAKES BLVD, SUITE 1220
WEST PALM BEACH, FL 33401-2329 US

FEI Number: 65-0680322**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

GELFAND, MICHAEL J ESQ.
GELFAND & ARPE, P.A.
1555 PALM BEACH LAKES BLVD SUITE 1220
WEST PALM BEACH, FL 33401 US

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: MICHAEL J. GELFAND

01/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name MCDEVITT, SUZANNE J
Address % MICHAEL J GELFAND, ESQ
GELFAND & ARPE, P.A. 1555 PALM
BEACH LAKES BLVD., SUITE 1220
City-State-Zip: WEST PALM BEACH FL 33401-2329

Title VICE PRESIDENT, DIRECTOR
Name DAVISON, TIMOTHY C
Address % MICHAEL J. GELFAND, ESQ.
GELFAND & ARPE, P.A. 1555 PALM
BEACH LAKES BLVD., SUITE 1220
City-State-Zip: WEST PALM BEACH FL 33401-2329

Title DIRECTOR
Name MURPHY, CHRISTINA
Address C/O MICHAEL J. GELFAND, ESQ.
GELFAND & ARPE, P.A. 1555 PALM
BEACH LAKES BLVD., STE. 1220
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER, SECRETARY,
DIRECTOR, OFFICER
Name DURST, DOUGLAS
Address % MICHAEL J. GELFAND, ESQ.
GELFAND & ARPE, P.A. 1555 PALM
BEACH LAKES BLVD., SUITE 1200
City-State-Zip: WEST PALM BEACH FL 33401-2329

Title DIRECTOR
Name BRUMFIELD, AMY
Address C/O MICHAEL J. GELFAND, ESQ.
GELFAND & ARPE, P.A. 1555 PALM
BEACH LAKES BLVD., STE. 1220
City-State-Zip: WEST PALM BEACH FL 33401

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: SUZANNE MCDEVITT

PRES

01/29/2021

Electronic Signature of Signing Officer/Director Detail

Date