

**2020 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

03/18/2020

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            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            FIRST VICE PRESIDENT  
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 J MCDEVITT

PRESIDENT

03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date