

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709539

**FILED**  
**Feb 22, 2018**  
**Secretary of State**  
**CC6950359276**

**Entity Name:** THE OCEAN MONARCH CONDOMINIUM INC.

**Current Principal Place of Business:**

133 N POMPANO BCH BLVD  
MANAGEMENT OFFICE  
POMPANO BCH, FL 33062

**Current Mailing Address:**

133 N POMPANO BCH BLVD  
MANAGEMENT OFFICE  
POMPANO BCH, FL 33062 US

**FEI Number: 59-1164790**

**Certificate of Status Desired: No**

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

TRIPP SCOTT ATTORNEYS AT LAW  
110 SE 6TH STREET SUITE 1500  
FT. LAUDERDALE, FL 33301 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:** LINDSAY RAPHAEL

02/22/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title GOVERNOR  
Name DRAGOJEVIC, NADA  
Address 133 N POMPANO BEACH BLVD.  
MGT OFFICE  
City-State-Zip: POMPANO BEACH FL 33062

Title PRESIDENT  
Name SAVINO, WILLIAM  
Address 133 N POMPANO BEACH BLVD.  
MGT OFFICE  
City-State-Zip: POMPANO BCH FL 33062

Title VP  
Name LANTIERI, MATTHEW  
Address 133 N. POMPANO BEACH BLVD  
MGT OFFICE  
City-State-Zip: POMPANO FL 33062

Title GOVERNOR  
Name SODIKOFF, JEFFREY  
Address 133 N. POMPANO BEACH BLVD.  
MGT OFFICE  
City-State-Zip: POMPANO BEACH FL 33062

Title GOVERNOR  
Name ARENA, POMPEO  
Address 133 N POMPANO BCH BLVD  
MGT OFFICE  
City-State-Zip: POMPANO BCH FL 33062

Title SECRETARY  
Name HOUVARDAS, EMMANUEL  
Address 133 N POMPANO BCH BLVD  
MGT OFFICE  
City-State-Zip: POMPANO BCH FL 33062

Title TREASURER  
Name MORHART, MARK  
Address 133 N. POMPANO BCH BLVD.  
MGT OFFICE  
City-State-Zip: POMPANO BCH FL 33062

*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:** WILLIAM SAVINO

**PRESIDENT**

02/22/2018

Electronic Signature of Signing Officer/Director Detail

Date