

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 713075

Entity Name: OCEAN REEF COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

35 OCEAN REEF DR, SUITE 220
KEY LARGO, FL 33037

Current Mailing Address:

24 DOCKSIDE LANE
PMB 505
KEY LARGO, FL 33037 US

FEI Number: 59-1747816

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EISINGER BROWN LEWIS FRANKEL & CHAIET PA
ATTN: DENNIS J. EISINGER, ESQUIRE
4000 HOLLYWOOD BLVD., SUITE 265-S
HOLLYWOOD, FL 33021 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name TINDLE, GREGORY
Address 24 DOCKSIDE LANE PMB#505
City-State-Zip: KEY LARGO FL 33037

Title VP
Name OELTJEN, JEFF
Address 24 DOCKSIDE LANE PMB #505
City-State-Zip: KEY LARGO FL 33037

Title TREASURER
Name CONNOLLY, KATARZYNA
Address 24 DOCKSIDE LANE PBM #505
City-State-Zip: KEY LARGO FL 33037

Title P
Name RITZ, DAVID C
Address 24 DOCKSIDE LANE PMB #505
City-State-Zip: KEY LARGO FL 33037

Title S
Name JACKSON, KATHERINE
Address 24 DOCKSIDE LANE PMB #505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name ELENBAAS, NANETTE
Address 24 DOCKSIDE LANE PMB #505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name LEEMHUIS, MICHAEL
Address 35 OCEAN REEF DRIVE
SUITE 200
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name WISHNACK, MARSHALL
Address 24 DOCKSIDE LANE PMB #505
City-State-Zip: KEY LARGO FL 33037

Continues on page 2

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: KATHERINE JACKSON

SECRETARY

06/07/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STOUT, HENRY
Address 24 DOCKSIDE LANE, PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name WILSON, WILLIAM III
Address 24 DOCKSIDE LANE PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name LIST, GARY
Address 24 DOCKSIDE LANE PMB 505
City-State-Zip: KEY LARGO FL 33037

Title VP
Name JAMES, TIM
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name HOLMES, TERESA
Address 24 DOCKSIDE LANE PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name FOSTER, MICHAEL
Address 24 DOCKSIDE LANE PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name WEISLEDER, BROOKE
Address 24 DOCKSIDE LANE PMB 505
City-State-Zip: KEY LARGO FL 33037