

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

DOCUMENT# 719100

**Entity Name:** OCEAN RIVIERA ASSOCIATION, INC.

**Current Principal Place of Business:**

3550 GALT OCEAN DRIVE  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

3550 GALT OCEAN DRIVE  
FORT LAUDERDALE, FL 33308

**FEI Number:** 59-1346320

**Certificate of Status Desired:** No

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

KAYE BENDER REMBAUM P.L.  
1200 PARK CENTRAL BOULEVARD SOUTH  
POMPANO BEACH, FL 33064 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            PRES  
Name            KELLEY, ROSEMARY  
Address        3550 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            VICE  
Name            BELUSCHAK, JOHN  
Address        3550 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            TREA  
Name            STAMATAKIS, PAUL  
Address        3550 GALT OCEAN DR  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            SEC  
Name            RUSSO, ERMANN "ZIPPY"  
Address        3550 GALT OCEAN DR.  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            SHADEED, BRUCE  
Address        3550 GALT OCEAN DRIVE  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            MANGONE, RICHARD  
Address        3550 GALT OCEAN DRIVE  
City-State-Zip: FORT LAUDERDALE FL 33308

Title            DIRECTOR  
Name            MUZZIOLI, DANTE  
Address        3550 GALT OCEAN DRIVE  
City-State-Zip: FORT LAUDERDALE FL 33308

*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:** PAUL STAMATAKIS

**TREASURER**

**02/23/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date