2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2021
Secretary of State
4407768612CC

DOCUMENT# 721282

Entity Name: OCEAN PALM VILLA ASSOCIATION, INC.

Current Principal Place of Business:

15 CYPRESS BRANCH WAY
207A
PALM COAST, FL 32164

Current Mailing Address:

4845 BELLE TERRE PKWY
C19
PALM COAST, FL 32164 US

FEI Number: 59-1396711

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

G.L. THOMPSON ASSOCIATION MANAGEMENT
15 CYPRESS BRANCH WAY
207A
PALM COAST, FL 32164 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: GARY THOMPSON 03/30/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR	Title	VP
Name	HANN, STEVEN	Name	WHITE, DAVID
Address	15 CYPRESS BRANCH WAY 207A	Address	15 CYPRESS BRANCH WAY 207A
City-State-Zip:	PALM COAST FL 32164	City-State-Zip:	PALM COAST FL 32164
Title	SECRETARY	Title	PRESIDENT
Name	NELSON, REBECCA	Name	PASCARELLA, LOU
Address	15 CYPRESS BRANCH WAY 207A	Address	15 CYPRESS BRANCH WAY 207A
City-State-Zip:	PALM COAST FL 32164	City-State-Zip:	PALM COAST FL 32164
Title	TREASURER	Title	MANAGER
Name	HEALEY, CHRIS	Name	THOMPSON, GARY
Address	15 CYPRESS BRANCH WAY 207A	Address	15 CYPRESS BRANCH WAY 207A
City-State-Zip:	PALM COAST FL 32164	City-State-Zip:	PALM COAST FL 32164

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: GARY THOMPSON MANAGER 03/30/2021

Electronic Signature of Signing Officer/Director Detail — Date