#### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

#### 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			02/17/2020
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DIRECTOR	Title	DIRECTOR	
Name	HANN, STEVEN	Name	HENRY, CLIFTON	
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	WINDOM, DEBORAH	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			
Name	NELSON, REBECCA			
Address	15 CYPRESS BRANCH WAY 207A			
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.

PRESIDENT

#### SIGNATURE: LOU PASCARELLA

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 17, 2020 Secretary of State 8627543054CC

Certificate of Status Desired: No

02/17/2020 Date