

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

DOCUMENT# 726851

**Entity Name:** OCEAN PALM VILLAS SOUTH CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 31, 2020**  
**Secretary of State**  
**2892921442CC**

**Current Principal Place of Business:**

86 OCEAN PALM VILLAS S  
FLAGLER BEACH, FL 32136

**Current Mailing Address:**

3280 S. ATLANTIC AVENUE  
SUITE A  
DAYTONA BEACH SHORES, FL 32118

**FEI Number: 59-1559147**

**Certificate of Status Desired: No**

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

HUNT, JAMES R  
3280 S. ATLANTIC AVENUE  
SUITE A  
DAYTONA BEACH SHORES, FL 32118 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 D  
Name CLARK, NORMA  
Address 3 OCEAN PALM VILLAS SOUTH  
City-State-Zip: FLAGLER BEACH FL 32136

Title SECRETARY  
Name HAMEL, RICHARD  
Address 9753 SE 125TH LANE  
City-State-Zip: SUMMERFILED FL 34491-9212

Title DIRECTOR  
Name LOCKETT, ROBERT  
Address 48 OCEAN PALM VILLA SOUTH  
City-State-Zip: FLAGLER FL 32136

Title PRESIDENT  
Name TILLOTSON, DAVID  
Address 30 OCEAN PALM VILLAS S  
City-State-Zip: FLAGLER BEACH FL 32136

Title VP  
Name HELWIG, DANIEL  
Address 83 OCEAN PALM VILLAS SOUTH  
City-State-Zip: FLAGLER BEACH FL 32136

Title TREASURER  
Name WY SOCKIE, BRIAN  
Address 28 PALISADE ST. NEPEAN  
City-State-Zip: ONTARIO CN K2G-5M5

*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: DAVID TILLOTSON**

**P**

**01/31/2020**

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

\_\_\_\_\_  
Date