2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727317

Entity Name: OCEAN BREEZE ASSOCIATION, INC.

Current Principal Place of Business:

533 N NOVA ROAD SUITE 102 ORMOND BEACH, FL 32174

Current Mailing Address:

533 N. NOVA ROAD SUITE 102

ORMOND BEACH, FL 32174 US

FEI Number: 59-1577275 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

BARKER, PATTI A. 533 N. NOVA ROAD SUITE 102

ORMOND BEACH, FL 32174 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: PATTI A BARKER 03/14/2022

Electronic Signature of Registered Agent

Date

WATERS, CLARK

FILED Mar 14, 2022

Secretary of State

6392375034CC

Officer/Director Detail:

Title SECRETARY, TREASURER, Title DIRECTOR

DIRECTOR Name

Name SEED, CHARLES MR Address 1405 N FOREST AVENUE

Address 533 N. NOVA ROAD

ORLANDO FL 32803 City-State-Zip: SUITE 102

ORMOND BEACH FL 32174 City-State-Zip: Title DIRECTOR

Title VP, DIRECTOR Name KASSEBAUM, ROBERT Name HUGHES, BRIAN Address 533 N. NOVA ROAD

SUITE 102 533 N. NOVA ROAD Address

City-State-Zip: ORMOND BEACH FL 32174 SUITF 102

ORMOND BEACH FL 32174 City-State-Zip:

Title DIRECTOR

BURKHARDT, SHEILA Title DIRECTOR Name

ERIKSTRUP, DAVID 3510 S OCEAN SHORE BLVD Name Address

UNIT 208 Address 533 N NOVA ROAD

City-State-Zip: ORMOND BEACH FL 32174 SUITE 102

City-State-Zip: ORMOND BEACH FL 32174 Title PRESIDENT, DIRECTOR

Title DIRECTOR Name MASON, ANDY

533 N NOVA ROAD SUITE 102 Name LIZASO, MARJIE Address

Address 533 N NOVA ROAD SUITE 102 City-State-Zip: ORMOND BEACH FL 32174

City-State-Zip: ORMOND BEACH FL 32174 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.

03/14/2022 SIGNATURE: ANDY MASON PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name BENJAMIN, JOHN

Address 533 N NOVA ROAD SUITE 102 City-State-Zip: ORMOND BEACH FL 32174