

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727317

Entity Name: OCEAN BREEZE ASSOCIATION, INC.**Current Principal Place of Business:**3510 SOUTH OCEAN SHORE BLVD.
FLAGLER BEACH, FL 32136**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

03/10/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY, TREASURER,
DIRECTOR
Name SEED, CHARLES MR
Address 533 N. NOVA ROAD
SUITE 102
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name WATERS, CLARK
Address 1405 N FOREST AVENUE
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name KASSEBAUM, ROBERT
Address 533 N. NOVA ROAD
SUITE 102
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name MCCREA, ALISON
Address 533 N NOVA ROAD SUITE 102
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR, VP
Name BOWLING, JAMES
Address 3510 S OCEAN SHORE BLVD
UNIT 203
City-State-Zip: FLAGLER BEACH FL 32136

Title DIRECTOR
Name HUGHES, BRIAN
Address 533 N. NOVA ROAD
SUITE 102
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name ERIKSTRUP, DAVID
Address 533 N NOVA ROAD
SUITE 102
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name BURKHARDT, SHEILA
Address 3510 S OCEAN SHORE BLVD
UNIT 208
City-State-Zip: ORMOND BEACH FL 32174

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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: JAMES BOWLING

VICE PRESIDENT

03/10/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LIZASO, MARJIE
Address 533 N NOVA ROAD SUITE 102
City-State-Zip: ORMOND BEACH FL 32174

Title PRESIDENT, DIRECTOR
Name MASON, ANDY
Address 533 N NOVA ROAD SUITE 102
City-State-Zip: ORMOND BEACH FL 32174