

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732870

**Entity Name:** OCEANA ASSOCIATION, INC.

**Current Principal Place of Business:**

9920 S. OCEAN DR.  
HUTCHINSON ISLAND  
JENSEN BEACH, FL 34957-2433

**Current Mailing Address:**

9920 S. OCEAN DR.  
HUTCHINSON ISLAND  
JENSEN BEACH, FL 34957-2433

**FEI Number: 59-1799874**

**Certificate of Status Desired: No**

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

MOLLENGARDEN, PETER  
250 AUSTRALIAN AVE  
500  
WEST PALM BEACH, FL 33401 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: PETER MOLLENGARDEN**

**01/06/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, SECRETARY  
Name KORNILOFF, THERESA  
Address 9940 SOUTH OCEAN DRIVE  
201  
City-State-Zip: JENSEN BEACH FL 34957

Title D, VP  
Name BAUTISTA, JON  
Address 9900 SOUTH OCEAN DR  
City-State-Zip: JENSEN BEACH FL 34957

Title TREASURER  
Name MURRAY, DENNIS  
Address 9900 S OCEAN DR  
City-State-Zip: JENSEN BEACH FL 34957

Title DIRECTOR  
Name KIEON, STAN  
Address 9940 SOUTH OCEAN DRIVE  
709  
City-State-Zip: JENSENBEACH FL 34957

Title DIRECTOR, PRESIDENT  
Name LITERSKI, EDWIN  
Address 9900 SOUTH OCEAN DRIVE  
City-State-Zip: JENSEN BEACH FL 34957

*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: EDWIN LITERSKI**

**PRESIDENT**

**01/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date