Title	Ρ	Title	т
Name	WHIPPLE, GAIL	Name	MACGREGOR, ROD
Address	1930 COMMERCE LANE, SUITE 1	Address	1930 COMMERCE LANE, SUITE 1
City-State-Zip:	JUPITER FL 33458	City-State-Zip:	JUPITER FL 33458
Title	VP	Title	S
Name	BARNARD, BRUCE	Name	BURNS, CHARLEE
Address	1930 COMMERCE LANE, SUITE 1	Address	1930 COMMERCE LANE, SUITE 1
City-State-Zip:	JUPITER FL 33458	City-State-Zip:	JUPITER FL 33458
Title	DIRECTOR	Title	DIRECTOR
Name	PANZICA, SAM	Name	FOLEY, KATHLEEN
Address	1930 COMMERCE LANE #1	Address	1930 COMMERCE LANE STE 1
City-State-Zip:	JUPITER FL 33458	City-State-Zip:	JUPITER FL 33458
Title	DIRECTOR		
Name	KOWALSKI, DAVID M		
Address	1930 COMMERCE LANE STE 1		
City-State-Zip:	JUPITER FL 33458		

SIGNATURE: GAIL WHIPPLE 03/11/2014

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.

# FEI Number: 59-1721857

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

WHIPPLE, GAIL 1930 COMMERCE LANE STE 1 JUPITER, FL 33458 US

**Officer/Director Detail :** 

# 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 734431

Entity Name: OCEAN TRAIL CONDOMINIUM ASSOCIATION NO. 1, INC.

## **Current Principal Place of Business:**

200 OCEAN TRAIL WAY JUPITER, FL 33477

## **Current Mailing Address:**

200 OCEAN TRAIL WAY #200 JUPITER, FL 33477

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

#### SIGNATURE: GAIL WHIPPLE

above, or on an attachment with all other like empowered.

PRESIDENT

03/11/2014

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Date