

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738053

**Entity Name:** 461 OCEAN CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 26, 2016**  
**Secretary of State**  
**CC6572548393**

**Current Principal Place of Business:**

461 N OCEAN BLVD  
APT. 1  
BOCA RATON, FL 33432

**Current Mailing Address:**

461 N OCEAN BLVD  
APT. 1  
BOCA RATON, FL 33432 US

**FEI Number:** 62-1025173

**Certificate of Status Desired:** No

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

CHILDERS, EARL  
461 N OCEAN BLVD  
#1  
BOCA RATON, FL 33432 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 TD  
Name RICAURTE, ALBERTO  
Address 461 N. OCEAN BLVD, STE 2  
City-State-Zip: BOCA RATON FL 33432-4211

Title PD  
Name SCHWARTZ, MAYAN  
Address 461 N OCEAN BLVD SUITE 6  
City-State-Zip: BOCA RATON FL 33432-4211

Title VP  
Name NOVELLE, DONALD  
Address 461 N OCEAN BLVD #2  
City-State-Zip: BOCA RATON FL 33432

*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: ALBERTO RICAURTE**

**TREASURER**

**04/26/2016**

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

\_\_\_\_\_  
Date