

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746197

**Entity Name:** OCEANS FOUR CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**MANAGEMENT OFFICE  
3003 SOUTH ATLANTIC AVENUE  
DAYTONA BEACH SHORES, FL 32118**Current Mailing Address:**MANAGEMENT OFFICE  
3003 SOUTH ATLANTIC AVENUE  
DAYTONA BEACH SHORES, FL 32118 US**FEI Number:** 59-2067988**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, S. JANE  
3003 SOUTH ATLANTIC AVENUE  
# 2B4  
DAYTONA BEACH SHORES, FL 32118 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	P
Name	SMITH, S. JANE
Address	3003 SOUTH ATLANTIC AVENUE #2B4
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

Title	S
Name	EVANS, PATRICIA
Address	MANAGEMENT OFFICE 3003 SOUTH ATLANTIC AVENUE
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

Title	DIRECTOR
Name	MORBITZER, MARGARET LEE
Address	MANAGEMENT OFFICE 3003 SOUTH ATLANTIC AVENUE
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

Title	VP
Name	FEUERSTEIN, ADALBERT
Address	MANAGEMENT OFFICE 3003 SOUTH ATLANTIC AVENUE
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

Title	T
Name	DATZ, ERIC
Address	MANAGEMENT OFFICE 3003 SOUTH ATLANTIC AVENUE
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

Title	DIRECTOR
Name	COLE, CARRIE WRIGHT
Address	MANAGEMENT OFFICE 3003 SOUTH ATLANTIC AVENUE
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

*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:** SMITH, S. JANE**PRESIDENT****06/18/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date