

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751745

Entity Name: 89 OCEANFRONT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

89 SOUTH ATLANTIC AVENUE
ORMOND BEACH, FL 32176

Current Mailing Address:

89 SOUTH ATLANTIC AVENUE
ORMOND BEACH, FL 32176

FEI Number: 59-2129737

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, TRACY
89 SOUTH ATLANTIC AVENUE
ORMOND BEACH, FL 32176 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: MARILYN JUENGST

04/18/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BALOG, SUSAN
Address 89 SOUTH ATLANTIC AVENUE #604
City-State-Zip: ORMOND BEACH FL 32176

Title 2VP
Name ANTONIO, SAM
Address 89 SOUTH ATLANTIC AVE #1206
City-State-Zip: ORMOND BEACH FL 32176

Title TREASURER
Name PARKER, JANICE
Address 89 SOUTH ATLANTIC AVE. #704
City-State-Zip: ORMOND BEACH FL 32176

Title 1ST VP
Name SIRAGUSA, ALEX
Address 89 S. ATLANTIC AVE. #1401
City-State-Zip: ORMOND BEACH FL 32176

Title SECRETARY
Name KELLY, JOAN
Address 89 S. ATLANTIC AVE. #1004
City-State-Zip: ORMOND BEACH FL 32176

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: SUSAN BALOG

PRESIDENT

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date