

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751811

**Entity Name:** THE OCEANNA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

OCEANNA CONDO ASSOC.  
8000 SURF DR  
PANAMA CITY BEACH, FL 32408

**Current Mailing Address:**

LEONARD MERIDA.  
P.O.BOX 86  
FLOYD, VA 24091 US

**FEI Number: 59-2451424**

**Certificate of Status Desired: No**

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

JANE, LANCASTER  
8000 SURF DR  
PANAMA CITY BEACH, FL 32408 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            PRESIDENT  
Name            MERIDA, LEONARD C.  
Address        LEONARD MERIDA  
                  P.O.BOX 86  
City-State-Zip: FLOYD VA 24091

Title            SECRETARY  
Name            WILLIAMS, SHERRI  
Address        658 SPRUCE RD.  
City-State-Zip: GRACEVILLE FL 32440

Title            DIRECTOR / VP  
Name            MATTEWS, JIM  
Address        17305 FRONT BEACH ROAD  
City-State-Zip: PANAMA CITY BEACH FL 32413

Title            DIRECTOR  
Name            WATKINS, BILLY  
Address        42 RIVERVIEW COURT  
City-State-Zip: CARTERSVILLE GA 30120

Title            DIRECTOR  
Name            MCCULLOUGH, KAREN ALYANA  
Address        3436 AIRLINE RD.  
City-State-Zip: ANDERSON SC 29624

Title            DIRECTOR  
Name            PEEL, MARIE  
Address        1691 PEEL RD.  
City-State-Zip: CHIPLEY FL 32428

Title            DIRECTOR  
Name            DICKSON, CHRIS  
Address        7855 MEADOW LANE  
City-State-Zip: NEWBERG IN 37630

*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: LEONARD MERIDA**

**PRESIDENT**

**02/02/2021**

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

\_\_\_\_\_  
Date