

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759033

**Entity Name:** OCEAN HARBOUR SOUTH UTILITIES CORPORATION, INC.

**Current Principal Place of Business:**

4245 N HWY A1A  
FT PIERCE, FL 34949

**Current Mailing Address:**

C/O ELLIOTT MERRILL MGNT.  
835 20TH PLACE  
VERO BEACH, FL 32960

**FEI Number: 59-2747359**

**Certificate of Status Desired: No**

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

ROSS, DEBORAH  
789 S FEDERAL HWY SUITE 101  
STUART, FL 34994 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 DIRECTOR  
Name BOHLMAN, PETER A  
Address 4250 N. HIGHWAY A1A #206  
City-State-Zip: FT PIERCE FL 34949

Title DIRECTOR  
Name LUCARDI, MICHAEL T  
Address 4200 N. HIGHWAY A1A #412  
City-State-Zip: FORT PIERCE FL 34949

Title P  
Name GILLILAND, LEWIS E  
Address 4225 N. HIGHWAY A1A #19  
City-State-Zip: FORT PIERCE FL 34949

Title TREASURER/ SECRETARY  
Name SHETLER, DAVID  
Address 4200 N A1A #1115  
City-State-Zip: FT. PIERCE FL 34949

Title DIRECTOR  
Name GAMBINO, ROY  
Address 4200 NORTH A1A #111  
City-State-Zip: FORT PIERCE FL 34949

*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: LEWIS GILLILAND**

**PRESIDENT**

**04/27/2015**

Electronic Signature of Signing Officer/Director Detail

Date