

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

DOCUMENT# 765272

**Entity Name:** OCEAN CLUB I CONDOMINIUM ASSOC., INC. OF ST.  
AUGUSTINE BEACH**FILED**  
**Mar 08, 2016**  
**Secretary of State**  
**CC6450735057****Current Principal Place of Business:**OCEAN CLUB I CONDOMINIUM ASSOCIATION, INC  
11 DONDANVILLE ROAD  
SAINT AUGUSTINE, FL 32080**Current Mailing Address:**C/O COASTAL REALTY & PROPERTY MANAGEMENT  
3942 A1A SOUTH  
SAINT AUGUSTINE, FL 32080 US**FEI Number: 59-2256951****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ALLIGOOD, JUDY S  
3942 A1A SOUTH  
ST. AUGUSTINE, FL 32080 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: JUDY S ALLIGOOD****03/08/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** DIRECTOR  
**Name** BAYER, MARCIA  
**Address** 49 WOODLAWN AVENUE  
**City-State-Zip:** EAST MORICHES NY 11940**Title** PRESIDENT  
**Name** HUSSMANN, JAMES  
**Address** 11 DONDANVILLE ROAD  
#19  
**City-State-Zip:** ST. AUGUSTINE FL 32080**Title** MANAGER  
**Name** ALLIGOOD, JUDY S  
**Address** COASTAL REALTY &; PROPERTY  
MANAGEMENT  
3942 A1A SOUTH  
**City-State-Zip:** ST AUGUSTINE FL 32080**Title** VP  
**Name** HARRISON, DIANA  
**Address** 11 DONDANVILLE ROAD  
#8  
**City-State-Zip:** ST. AUGUSTINE FL 32080**Title** SECRETARY  
**Name** BRIGMAN, SHERRY  
**Address** 11 DONDANVILLE ROAD  
#42  
**City-State-Zip:** ST. AUGUSTINE FL 32080**Title** TREASURER  
**Name** ESTRADA, CAROLYNE  
**Address** 11 DONDANVILLE ROAD  
#12  
**City-State-Zip:** ST AUGUSTINE FL 32080

*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: JUDY ALLIGOOD****MANAGER****03/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date