			Ochtineate of Otatus Desire	
Name and Address of Current Registered Agent:				
BAUMANN, KAI 391 S. TIMBERI NEW SMYRNA				
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	KARLA L BAUMANN			02/15/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	VP	
Name	SMITH, LYNN	Name	TORGENSEN, KIRK	
Address	391 S. TIMBERLANE DRIVE	Address	391 S. TIMBERLANE DRIVE	
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 3216	3
Title	TREASURER	Title	SECRETARY	
Name	SUMMERS, BRENT	Name	FORD, BOB	
Address	391 S. TIMBERLANE DRIVE	Address	391 S. TIMBERLANE DRIVE	
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 3216	3
Title	ASST. SECRETARY	Title	DIRECTOR	
Name	BAUMANN, KARLA	Name	SCHIPMAN, DAN	
Address	391 S. TIMBERLANE DRIVE	Address	391 S. TIMBERLANE DRIVE	
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 3216	3
Title	DIRECTOR	Title	DIRECTOR	
Name	ROCHA, LARRY	Name	WEINKAM, ED	
Address	391 S. TIMBERLANE DRIVE	Address	391 S. TIMBERLANE DRIVE	

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000004732

Entity Name: OCEAN WALK AT NEW SMYRNA BEACH MASTER ASSOCIATION, INC.

**Current Principal Place of Business:** 

5300 S ATLANTIC AVENUE NEW SMYRNA BEACH, FL 32169

## **Current Mailing Address:**

391 S. TIMBERLANE DRIVE NEW SMYRNA BEACH, FL 32168 US

## FEI Number: 59-3671641

## N

FILED Feb 15, 2019 Secretary of State 2446128549CC

Certificate of Status Desired: No

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: KARLA BAUMANN

City-State-Zip: NEW SMYRNA BEACH FL 32168

ASST SECRETARY

City-State-Zip: NEW SMYRNA BEACH FL 32168

02/15/2019

Electronic Signature of Signing Officer/Director Detail

Date