

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004272

**FILED**  
**Jan 27, 2014**  
**Secretary of State**  
**CC8600109865**

**Entity Name:** OLD FLORIDA VILLAGE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

127 HIDDEN LAKE WAY  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

11714 EMERALD COAST PARKWAY  
MIRAMAR BEACH, FL 32550 US

**FEI Number:** 04-3766247

**Certificate of Status Desired:** No

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

COASTAL PROPERTIES ASSOCIATION MANAGEMENT  
11714 EMERALD COAST PARKWAY  
MIRAMAR BEACH, FL 32550 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:** ZACH JOHNSON

01/27/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HOWER, DIANE  
Address 11714 EMERALD COAST PARKWAY  
City-State-Zip: MIRAMAR BEACH FL 32550

Title VP  
Name AHMED, BRIAN  
Address 11714 EMERALD COAST PARKWAY  
City-State-Zip: MIRAMAR BEACH FL 32550

Title TREASURER  
Name GANSEREIT, KATHY  
Address 11714 EMERALD COAST PARKWAY  
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR  
Name BREMER, SUSAN  
Address 11714 EMERALD COAST PARKWAY  
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR  
Name HARRINGTON, JIM  
Address 11714 EMERALD COAST PARKWAY  
City-State-Zip: MIRAMAR BEACH FL 32550

*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:** HOWER, DIANE

P

01/27/2014

Electronic Signature of Signing Officer/Director Detail

Date