

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000000385

**FILED**  
**Jan 09, 2013**  
**Secretary of State**  
**CC4243793542**

**Entity Name:** OCEAN PALMS ASSOCIATION, INC.

**Current Principal Place of Business:**

3101 S. OCEAN DRIVE  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

3101 S. OCEAN DRIVE  
HOLLYWOOD, FL 33019

**FEI Number: 51-0542213**

**Certificate of Status Desired: No**

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

SCHORR, MARK B  
800 S.E. THIRD AVE  
STE 300  
FORT LAUDERDALE, FL 33316-1152 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 PD  
Name NEWMAN, VIVIANE  
Address 3101 S. OCEAN DRIVE  
City-State-Zip: HOLLYWOOD FL 33019

Title T  
Name BAXTER, RAYMOND  
Address 3101 S. OCEAN DR.  
City-State-Zip: HOLLYWOOD FL 33019

Title S  
Name MEYER, JOHN  
Address 3101 S. OCEAN DRIVE  
City-State-Zip: HOLLYWOOD BEACH FL 33019

Title VP  
Name BODE, OSCAR  
Address 3101 S. OCEAN DRIVE  
City-State-Zip: HOLLYWOOD BEACH FL 33019

Title DIRECTOR  
Name KEISTER, LINDA  
Address 3101 S OCEAN DRIVE  
City-State-Zip: HOLLYWODD FL 33019

*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: VIVIANE NEWMAN**

**PRESIDENT**

**01/09/2013**

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

\_\_\_\_\_  
Date