

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

DOCUMENT# N03000010698

**FILED**  
**Mar 26, 2014**  
**Secretary of State**  
**CC7875137289**

**Entity Name:** OCEAN OASIS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

225 NORTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931

**Current Mailing Address:**

1980 N ATLANTIC AVE. #701  
COCOA BEACH, FL 32931 US

**FEI Number:** 56-2471786

**Certificate of Status Desired:** No

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

PIROG, FRANK S  
225 NORTH ATLANTIC AVE.  
502  
COCOA BEACH, FL 32931 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 PIROG, FRANK S  
Address 225 N. ATLANTIC AVE., #502  
City-State-Zip: COCOA BEACH FL 32931

Title SD  
Name GUZMAN, JEROME  
Address 225 N. ATLANTIC AVE., #603  
City-State-Zip: COCOA BEACH FL 32931

Title TD  
Name POTTS, GARY  
Address 225 N. ATLANTIC AVE., #401  
City-State-Zip: COCOA BEACH FL 32931

*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:** FRANK S PIROG

**PRESIDENT**

**03/26/2014**

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

\_\_\_\_\_  
Date