	Electronic Signature of Registered Agent				
Officer/Dired	ctor Detail :				
Title	TREASURER		Title	SECRETARY	
Name	HECKER, MELANIE		Name	FIRESTONE, JOHN	
Address	3248 NE 13 STREET		Address	3244 NE 13 STREET	
City-State-Zip:	POMPANO BEACH FL 33062		City-State-Zip:	POMPANO BEACH FL 3	33
Title	PRESIDENT				
Name	SMITH , RANDAL				
Address	3250 NE 13 STREET				
City-State-Zip:	POMPANO BEACH FL 33062				

P.O. BOX 802

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

TMG MANAGEMENT 631 E. ATLANTIC BLVD. POMPANO BEACH, FL 33060 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:

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: RANDAL SMITH

Electronic Signature of Signing Officer/Director Detail

Entity Name: OCEAN ENCLAVE II HOMEOWNERS'S ASSOCIATION, INC.

# **Current Principal Place of Business:**

3236-3250 NE 13TH STREET POMPANO BEACH. FL 33062

### **Current Mailing Address:**

POMPANO BEACH. FL 33061

### FEI Number: 20-8659140

## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N0700002812

Certificate of Status Desired: No

33062

PRESIDENT

FILED Feb 02, 2015 Secretary of State CC1974224517

02/02/2015

Date

Date