

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003189

**Entity Name:** OCEAN PLACE AT SILVER BEACH ASSOCIATION, INC.

**Current Principal Place of Business:**

1868 NORTH UNIVERSITY DRIVE  
SUITE 205  
PLANTATION, FL 33322

**Current Mailing Address:**

P.O BOX 122015  
FORT LAUDERDALE, FL 33312

**FEI Number: 26-0157885**

**Certificate of Status Desired:** No

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

TDSUNSHINE PROPERTY MANAGEMENT  
1868 NORTH UNIVERSITY DRIVE  
SUITE 205  
PLANTATION, FL 33322 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 TEIXIERA, CARLOS  
Address 1868 NORTH UNIVERSITY DRIVE  
SUITE 205  
City-State-Zip: PLANTATION FL 33322

Title TD  
Name MORAIS, MARIA  
Address 1868 NORTH UNIVERSITY DRIVE  
SUITE 205  
City-State-Zip: PLANTATION FL 33322

Title SD  
Name MORAIS, DOMINGOS  
Address 1868 NORTH UNIVERSITY DRIVE  
SUITE 205  
City-State-Zip: PLANTATION FL 33322

Title DIRECTOR  
Name KORCHMAR, GREGORY  
Address 330 SOUTH STATE ROAD 7  
SUITE 500  
City-State-Zip: PLATATION FL 33317

Title DIRECTOR  
Name KORCHMAR, GREGORY  
Address 1868 NORTH UNIVERSITY DRIVE  
SUITE 205  
City-State-Zip: PLANTATION FL 33322

*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: CARLOS TEIXIERA**

**PRESIDENT**

**03/24/2015**

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

\_\_\_\_\_  
Date