

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000011409

**Entity Name:** 6855 N. OCEAN BOULEVARD INC.**Current Principal Place of Business:**6855 N OCEAN BOULEVARD  
OCEAN RIDGE, FL 33435**Current Mailing Address:**6855 N OCEAN BOULEVARD  
OCEAN RIDGE, FL 33435**FEI Number:** 59-1316952**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAILEY, BENJAMIN M III  
6855 N OCEAN BOULEVARD  
OCEAN RIDGE, FL 33435 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:** BENJAMIN M BAILEY III

04/26/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name O'KEEFE, DENNIS  
Address 6855 N OCEAN BOULEVARD  
City-State-Zip: OCEAN RIDGE FL 33435

Title T  
Name AALFS, JOHN  
Address 6855 N OCEAN BOULEVARD  
City-State-Zip: OCEAN RIDGE FL 33435

Title D  
Name NEUMAN, EMLER  
Address 6855 N OCEAN BOULEVARD  
City-State-Zip: OCEAN RIDGE FL 33435

Title T  
Name COLEMAN, PAULA  
Address 6855 N OCEAN BOULEVARD  
City-State-Zip: OCEAN RIDGE FL 33435

Title VP  
Name MAHLER, GARY  
Address 6855 N OCEAN BOULEVARD  
City-State-Zip: OCEAN RIDGE FL 33435

Title P  
Name NELSON, SCOTT  
Address 6855 N OCEAN BLVD  
City-State-Zip: OCEAN RIDGE FL 33435

Title S  
Name BAILEY , BENJAMIN M III  
Address 6855 N OCEAN BOULEVARD  
City-State-Zip: OCEAN RIDGE FL 33435

*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:** BENJAMIN M BAILEY III

S

04/26/2021

Electronic Signature of Signing Officer/Director Detail

Date