

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09026

**FILED**  
**Feb 19, 2018**  
**Secretary of State**  
**CC2248144371**

**Entity Name:** OCEAN EIGHT CONDOMINIUM OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

7480 AIA SOUTH  
APT. 203  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

7480 A1A SOUTH  
SUITE 203  
SAINT AUGUSTINE, FL 32080 US

**FEI Number:** 59-2821941

**Certificate of Status Desired:** No

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

OBENAU, GARY  
7480 A1A SOUTH  
APT 203  
ST. AUGUSTINE, FL 32080 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 DP  
Name BOGGS, MIKE PRES  
Address 341 R.L. WHEELER RD  
City-State-Zip: MACON GA 31211

Title DVP  
Name OBERNAUF, GARY V. P.  
Address 7480 AIA S APT 203  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title D  
Name ROSSETT, HARRY  
Address 26 W 337 WIESBROOK RD  
City-State-Zip: WHEATON IL 60187

Title SD  
Name WAGENER, KEN  
Address 5012 N.W. 15TH PLACE  
City-State-Zip: GAINESVILLE FL

Title DT  
Name SEIPEL, FERD  
Address 7741 TOURNAMENT DR  
City-State-Zip: WATERVILLE OH 43566

*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:** FERD SEIPEL

**TRESURER**

**02/19/2018**

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

\_\_\_\_\_  
Date