

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33480

**Entity Name:** OCEANIA PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**16421 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160**Current Mailing Address:**16421 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160 US**FEI Number:** 65-0135252**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLIANCE CAS, LLC  
1000 HALLANDALE BEACH BLVD.  
HALLANDALE BEACH, FL 33009 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	PRESIDENT
Name	SCHWEIFEL, GARY
Address	16421 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	SECRETARY
Name	FOWLER, JIM
Address	16421 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	VP
Name	SPOKKEN, WILLIAM
Address	16421 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	DIRECTOR
Name	SILVERMAN, MARVIN
Address	16421 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	TREASURER
Name	PICKELL, BARBARA
Address	16421 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

*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:** BARBARA PICKELL**TREASURER****02/23/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date