2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46867

Entity Name: THE OMEGA RECREATION COUNCIL, INC.

Current Principal Place of Business:

7200 NW 17 STREET PLANTATION, FL 33313

Apr 26, 2021 Secretary of State 5851930058CC

FILED

Current Mailing Address:

PO BOX 19439

PLANTATION, FL 33318 US

FEI Number: 65-0402617 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A. 2699 STIRLING ROAD, SUITE C207 FORT LAUDERDALE, FL 33312 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: CHARLES F. OTTO, ESQ.

04/26/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title D Title D

Name BEAUCHENE, LINDA Name MCGILLIVRAY, HEATHER

Address PO BOX 19439 Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318 City-State-Zip: PLANTATION FL 33318

Title D Title D

Name CLEOPHAT, JOUBERT Name JASSO, TOMAS

Address PO BOX 19439 Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318 City-State-Zip: PLANTATION FL 33318

Title PRESIDENT, DIRECTOR Title DIRECTOR

Name JIMINEZ, HERMAN Name WARREN, ROBERT

Address PO BOX 19439 Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318 City-State-Zip: PLANTATION FL 33318

Title D Title D

Name KALISH, MARTIN Name DEBBIE, CARMICHAEL

Address PO BOX 19439 Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318 City-State-Zip: PLANTATION FL 33318

Continues on page 2

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: JIMINEZ , HERMAN P

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/26/2021

Date

Officer/Director Detail Continued:

Title TREASURER, SECRETARY, DIRECTOR

Name LEMOS, SANDRA Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name GOLDENBURG, JEFFREY

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name JORGE, DANIEL

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name HOOKER, TERRY Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name LEWIN, NATALIE

Address C/O ALLIANCE PROPERTY SYSTEMS

PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR
Name MOUNIR, MIKE
Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318

Title DIRECTOR

Name GANGOO, RONALD

Address PO BOX 19439

City-State-Zip: PLANTATION FL 33318