

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50952

**Entity Name:** OCEANSIDE AT FISHER ISLAND CONDOMINIUM NO. FIVE ASSOCIATION, INC.

**FILED**  
**Apr 14, 2023**  
**Secretary of State**  
**3853322955CC**

**Current Principal Place of Business:**

40306 FISHER ISLAND DR.  
FISHER ISLAND, FL 33109

**Current Mailing Address:**

40306 FISHER ISLAND DR.  
FISHER ISLAND, FL 33109 US

**FEI Number: 65-0360806**

**Certificate of Status Desired: No**

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

DAVID HABER, PA  
251 NW 23 STREET  
MIAMI, FL 33127 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: DAVID HABER**

**04/14/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HOROWITZ, JEFFREY  
Address        7273 FISHER ISLAND DR  
City-State-Zip: FISHER ISLAND FL 33109

Title            VP  
Name            LOCKS, GENE  
Address        7265 FISHER ISLAND DR  
City-State-Zip: FISHER ISLAND FL 33109

Title            SECRETARY  
Name            IANNARIELLO MONROY, MARIA PIA  
Address        7234 FISHER ISLAND DR  
City-State-Zip: FISHER ISLAND FL 33109

Title            TREASURER  
Name            NEHMEN, JOSEPH  
Address        7281 FISHER ISLAND DR  
City-State-Zip: FISHER ISLAND FL 33109

Title            DIRECTOR  
Name            KRIZ, JENNIFER  
Address        7245 FISHER ISLAND DR  
City-State-Zip: FISHER ISLAND FL 33109

Title            PROPERTY MANAGER  
Name            PAGES, GREYS  
Address        40306 FISHER ISLAND DR.  
City-State-Zip: FISHER ISLAND FL 33109

*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: GREYS PAGES**

**PROPERTY MANAGER**

**04/14/2023**

Electronic Signature of Signing Officer/Director Detail

Date