

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704972

FILED
Apr 19, 2011
Secretary of State

Entity Name: OCEANSIDE GOLF AND COUNTRY CLUB, INC.

Current Principal Place of Business:

75 NORTH HALIFAX AVENUE
ORMOND BCH, FL 32176 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 367
ORMOND BCH, FL 32175 US

New Mailing Address:

FEI Number: 59-1004935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HASKELL, THOMAS A
75 N HALIFAX DRIVE
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: SCHODER, ANTHONY JR.
Address: 2300 N. ATLANTIC AVE #102
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VPD
Name: LOUCKS, WILLIAM
Address: 410 RIVERSIDE DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD
Name: BANKER, RICK
Address: 64 COUNTRY CLUB DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: TD
Name: GRANT, CHARLES
Address: 150 NORTH BEACH STREET
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: KULZER, MICHAEL
Address: 325 RIVERSIDE DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: D
Name: KENNEDY, DENISE
Address: 1236 KILLARNEY DR.
City-St-Zip: ORMOND BEACH, FL 32174

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: ANTHONY SCHODER

PD

04/19/2011

Electronic Signature of Signing Officer or Director

Date