

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-03-2003 90484 030 ****61.25

DOCUMENT # 726851

1. Entity Name

OCEAN PALM VILLAS SOUTH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**88 OCEAN PALM VILLAS S
FLAGLER BEACH FL 32136**

Mailing Address

**88 OCEAN PALM VILLAS S
FLAGLER BEACH FL 32136**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1559147**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GAGNON, JOHN
70 OCEAN PALM VILLAS S
FLAGLER BEACH FL 32136**

Name

JOE TONDORA

Street Address (P.O. Box Number is Not Acceptable)

75 OCEAN PALM VILLAS SOUTH

City **FLAGLER BEACH**

FL

Zip Code **32136**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Joe Tondora

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-16-03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GAGNON, JOHN 70 OCEAN PALM VILLAS S FLAGLER BEACH FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WOODS, WAYNE 38 OCEAN PALM DR S FLAGLER BEACH FL 32136	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PELSANG, ELMER 52 OCEAN PALM VILLAS S FLAGLER BCH, FL 00000	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT KOBER, DONALD 84 OCEAN PALM VILLAS S FLAGLER BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANN, DON 1 LINWOOD AVE WESTERLY RI 02891	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHUETTLER, GUS SIX OCEAN PALM DR S FLAGLER BCH FL 32136	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JOE TONDORA 75 OCEAN PALM VILLAS SOUTH FLAGLER BCH FL 32136	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT WOODS, WAYNE 38 OCEAN PALM DR S FLAGLER BCH FL 32136	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY RAYMOND ALFORD 58 OCEAN PALM VILLAS S FLAGLER BEACH, FL 32136	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JOHN PONTE 62 OCEAN PALM VILLAS SOUTH FLAGLER BEACH, FL 32136	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ED OREILLY 42 OCEAN PALM VILLAS SOUTH FLAGLER BCH, FL 32136	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Joe Tondora

3-13-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)