

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742177

1. Entity Name

OCEAN PARK OWNERS' ASSOCIATION, INC.

FILED
Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90051 011 ****61.25

Principal Place of Business

Mailing Address

333 TAYLOR AVE
CAPE CANAVERAL FL 32920

333 TAYLOR AVE
CAPE CANAVERAL FL 32920-3027

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1896832

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MARSHALL, EDWARD
311 TAYLOR AVE #G118
CAPE CANAVERAL FL 32920

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DT ☐ Delete
NAME BOLDUC, RAYMOND
STREET ADDRESS 350 FILLMORE AVE F-23
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE VP/D ☒ Change ☐ Addition
NAME Bolduc, Raymond
STREET ADDRESS 350 Fillmore Ave. F-23
CITY-ST-ZIP Cape Canaveral, FL. 32920

TITLE P ☐ Delete
NAME LOKMAN, ADELINE
STREET ADDRESS 350 FILLMORE AVE G-5
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE P/D ☒ Change ☐ Addition
NAME Lookman, Adeline
STREET ADDRESS 350 Fillmore Ave. G-5
CITY-ST-ZIP Cape Canaveral, FL. 32920

TITLE DVP ☒ Delete
NAME LOOKMAN, ADELINE
STREET ADDRESS 311 TAYLOR AVE., G5
CITY-ST-ZIP CAPE CANAVERAL FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DICK, MARCELLE
STREET ADDRESS 350 FILLMORE AVE F-17
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE S/D ☒ Change ☐ Addition
NAME Dick, Marcelle
STREET ADDRESS 350 Fillmore Ave. F-17
CITY-ST-ZIP Cape Canaveral, FL. 32920

TITLE S ☐ Delete
NAME ROONEY, KATHRYN
STREET ADDRESS 350 FILLMORE F10
CITY-ST-ZIP CAPE CAN FL

TITLE D ☒ Change ☐ Addition
NAME Rooney, Kathryn
STREET ADDRESS 350 Fillmore Ave. F-10
CITY-ST-ZIP Cape Canaveral, FL. 32920

TITLE D ☐ Delete
NAME GEDUTIS, HELEN
STREET ADDRESS 350 FILLMORE AVE F-1
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE T/D ☒ Change ☐ Addition
NAME Gedutis, Helen
STREET ADDRESS 350 Fillmore Ave. F-1
CITY-ST-ZIP Cape Canaveral, FL. 32920

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Adeline Lookman, Pres. 3/30/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)