

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90044 041 ****61.25

DOCUMENT # 742177

1. Entity Name

OCEAN PARK OWNERS' ASSOCIATION, INC.



Principal Place of Business

333 TAYLOR AVENUE
CAPE CANAVERAL FL 32920

Mailing Address

333 TAYLOR AVENUE
CAPE CANAVERAL FL 32920

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1896832

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

RIGERMAN, MARILYN
200 NORTH FIRST STREET
COCOA BEACH FL 32931

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

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE DP ☐ Delete
NAME ADAMS, WILLIAM
STREET ADDRESS 414 WOODLAND STREET
CITY-ST-ZIP ORLANDO FL 32806

TITLE VD ☐ Delete
NAME FORMAN, HYMAN
STREET ADDRESS 251 TYLOR AVENUE 520
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE SD ☒ Delete
NAME WIESINGER, TONI
STREET ADDRESS 1525 MINUTEMEN CAUSEWAY #203
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE D ☐ Delete
NAME BOLDUC, RAYMOND
STREET ADDRESS 350 FILLMORE AVE #F23
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE TD ☐ Delete
NAME MCARTHY, DAVID
STREET ADDRESS 350 FILLMORE AVENUE F-6
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☒ Addition
NAME Kathryn Rooney
STREET ADDRESS 4545 Seneca Avenue
CITY-ST-ZIP COCOA FL 32926

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Raymond Bolduc