


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2005 8:00 am
Secretary of State

07-28-2005 90006 027 ****61.25

DOCUMENT # 763851 1. Entity Name OCEAN PALMS BEACH CLUB, INC.					
Principal Place of Business 2601 SOUTH ATLANTIC AVE NEW SMYRNA BEACH, FL 32169-3421				Mailing Address 2601 SOUTH ATLANTIC AVE NEW SMYRNA BEACH, FL 32169-3421	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent LAFLAND, DEA S 3318 UMBRELLA TREE DIVE EDGEWATER, FL 32141				7. Name and Address of New Registered Agent Name Deanna Bledsoe Street Address (P.O. Box Number is Not Acceptable) 4705 Bridgewater Dr City Orlando FL Zip Code 32817	
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 <u><i>Deanna Bledsoe, Treasurer</i></u> DATE <u>7/15/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD PRICE, BRYAN 244 DUANE ST LAKELAND, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Bledsoe, Jeff 4705 Bridgewater Dr. Orlando Florida 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP VPD POLOMSKY, CHARLENE 700 E CHAPMAN RD OVIDO, FL		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP VPD Reed, Joe 10349 Down Lake View Circle Windermere, Florida 34786	
TITLE NAME STREET ADDRESS CITY - ST - ZIP STD PRICE, MICHELLE 2114 DIANE ST LAKELAND, FL		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP SD Price, Michelle 2114 Diane Street Lakeland, Florida 33813	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP TD Deanna Bledsoe 4705 Bridgewater Dr Orlando, Florida 32817	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: <u><i>Deanna Bledsoe</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<u>7/15/05 (407)249-3300</u> <small>Date Daytime Phone #</small>	

50058374



07152005 Chg-NP CR2E037 (10/03)

4. FEI Number **59-2280080** Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**