

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90040 035 ****61.25

DOCUMENT # 763917

1. Entity Name
OCEAN TRAIL CONDOMINIUM ASSOCIATION NO. V, INC.



Principal Place of Business
**500 OCEAN TRAIL WAY
JUPITER, FL 33477**

Mailing Address
**1930 COMMERCE LANE
#1
JUPITER, FL 33458**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01182007

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-2221533

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

**INSLIS, STEVE PCAR
C/O BRISTOL MGMT.
1930 COMMERCE LANE, #1
JUPITER, FL 33458**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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 **D** ☒ Delete
NAME **BRIONES, RICHARD**
STREET ADDRESS **500 OCEAN TRL. WAY, #607**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **VPD** ☒ Delete
NAME **MATTEUCCI, VINCENT**
STREET ADDRESS **500 OCEAN TRAIL WAY #604**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **PD** ☒ Delete
NAME **SHORR, DONALD**
STREET ADDRESS **500 OCEAN TRAIL WAY #509**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **ASD** ☒ Delete
NAME **FLAVNER, JUDITH**
STREET ADDRESS **500 OCEAN TRAIL WAY #207**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **ATD** ☒ Delete
NAME **ADLER, DAVE**
STREET ADDRESS **OCEAN TRAIL WAY**
CITY-ST-ZIP **JUPITER, FL 33977**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPO** ☐ Change ☒ Addition
NAME **JOSEPH GIORDANO**
STREET ADDRESS **500 OCEAN TRAIL WAY # 411**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **PD** ☐ Change ☒ Addition
NAME **VINCENT MARINIELLO**
STREET ADDRESS **500 OCEAN TRAIL WAY #509**
CITY-ST-ZIP **JUPITER FL 33477**

TITLE **SD** ☐ Change ☒ Addition
NAME **CAROL WAGNER**
STREET ADDRESS **500 OCEAN TRAIL WAY # 209**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **TO** ☐ Change ☒ Addition
NAME **CLARK WALTER**
STREET ADDRESS **500 OCEAN TRAIL WAY #509**
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **DAVID D** ☐ Change ☒ Addition
NAME **DAVID CHOPLINSKI**
STREET ADDRESS **500 OCEAN TRAIL WAY # 509**
CITY-ST-ZIP **JUPITER, FL 33477**

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 Chapter 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:

David Choplinski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/07

Date

*215-467-9107
561-743-0478*

Daytime Phone #