

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 769690**

1. Entity Name

OCEAN REEF MARINA CONDOMINIUM I ASSOCIATION, INC**FILED****Apr 28, 2001 8:00 am**
Secretary of State

04-28-2001 90005 038 ****61.25

0034392

Principal Place of Business

Mailing Address

120 ANCHOR DR
KEY LARGO FL 33037
US120 ANCHOR DR
KEY LARGO FL 33037
US

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

59-2379984

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

**MOSS, EVELYN
100 ANCHOR DR
STE 476
KEY LARGO FL 33037**

Name

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

120 Anchor Drive

City

Key Largo**FL**

Zip Code

33037

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 **D** ☐ Delete
NAME **DELLIGATTI, JAMES**
STREET ADDRESS **100 ANCHOR DR 476**
CITY-ST-ZIP **KEY LARGO FL 33037**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **120 Anchor Drive**
CITY-ST-ZIP **Key Largo, FL 33037**TITLE **PD** ☐ Delete
NAME **LILLY, RICHARD**
STREET ADDRESS **100 ANCHOR DR 476**
CITY-ST-ZIP **KEY LARGO FL 33037**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **120 Anchor Drive**
CITY-ST-ZIP **Key Largo, FL 33037**TITLE **POA** ☐ Delete
NAME **MOSS, EVELYN**
STREET ADDRESS **100 ANCHOR DR 476**
CITY-ST-ZIP **KEY LARGO FL 33037**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **120 Anchor Drive**
CITY-ST-ZIP **Key Largo, FL 33037**TITLE **D** ☐ Delete
NAME **GRUNOW, JOHN**
STREET ADDRESS **100 ANCHOR DR 476**
CITY-ST-ZIP **KEY LARGO FL 33037**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **120 Anchor Drive**
CITY-ST-ZIP **Key Largo, FL 33037**TITLE **D** ☐ Delete
NAME **SPENCE, BILL**
STREET ADDRESS **100 ANCHOR DR 476**
CITY-ST-ZIP **KEY LARGO FL 33037**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **120 Anchor Drive**
CITY-ST-ZIP **Key Largo, FL 33037**TITLE **VD** ☐ Delete
NAME **HOFF, KENNETH**
STREET ADDRESS **100 ANCHOR DR 476**
CITY-ST-ZIP **KEY LARGO FL 33037**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **120 Anchor Drive**
CITY-ST-ZIP **Key Largo, FL 33037**

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: *Evelyn Moss* **Managing Agent****4-20-01 305-367-3232**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)