

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **790972** (4)

1. Corporation Name

OCEAN CLUB HOUSING ASSOCIATION INC



Principal Place of Business

Mailing Address

**4410 N. A1A
VERO BEACH FL 32963**

**4410 N. A1A
VERO BEACH FL 32963**

3. Date Incorporated or Qualified
07/23/1968

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

4. FEI Number

59-1269013

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**STEWART, WILLIAM J., ESQ.
MCKINNON, STEWART, NALL & MCKINNON
3355 OCEAN DR.
VERO BEACH FL 32963**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
DUNN, WALTER JR
921 VENTURA AVE
ORLANDO FL** ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TSD
KULMANN, CHARLES
1421 NOTTINGHAM STREET
ORLANDO FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HEIM, HERBERT
206 HORNER STREET
TOMS RIVER NJ** ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
GURNEY, LEEDS
617 INTERLACHEN AVENUE
WINTER PARK FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHOEN, BERNADINE
1237 VIA DEL MAR
WINTER PARK FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
**VPD
Max Booke
2110 Park Place
Ponte Vedra Beach, FL** ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
**D
Marjorie Soash
4410 N. A1A #306
Vero Beach, FL 32963** ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/96

407-667-0033

Date

Daytime Phone

CR2E037 (12/95)