FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(4)

OCEAN CLUB HOUSING ASSOCIATION INC

Principal Plac	e of Business	Mailing Address				
4410 N. A1A VERO BEACH FL 32963		4410 N. A1A VERO BEACH FL 32963		Date Incorporated or Qualified 07/23/1968 FEI Number	Applied For	
1					59-1269013	Not Applicable
2. Principal P	lace of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional	
21		26		J. Schmode of States Boshed	Fee Required	
Suite, Apt. #, etc		Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State		7. Is this nonprofit corporation a homeow		
23		28			Yes	
Zip Country		Zip Country		8. This corporation owes or has paid the current year Intangible		
24	25	[29]	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Hegistered Agent	81	Name	10. Name and Address of New Register	ed Agent
CTT-VAD	T 147111441 1 500				· · · · · · · · · · · · · · · · · · ·	
STEWART, WILLIAM J., ESO. MCKINNON, STEWART, NALL & MCKINNON			82	Street A	Address (P.O. Box Number is Not Acceptable)	
	CEAN DR.	NON	83	 		
	EACH FL 32963		84	City		. 85 Zip Code
İ				' '	F	-L ' '
11. Pursuant office or r	to the provisions of Sections 617.05(egistered agent, or bottli, in the State	02 and 617.1508, Florida State of Florida Such change wa	lutes, the above	e-named	corporation submits this statement for the purpos poration's board of directors. I hereby accept the	e of changing its registered
agent. I a	m familiar with, and accept the oblig	alions of, Section 617.0503,	Florida Statute	S.		
SIGNATURE	Signature, typed or printed name of registered ag	read and little of according to the	KATE Manietared Ac	ant tignature	required when reinstating) DAT	-
12.		ND DIRECTORS	13.	ent eignature	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	VPD	DELETE	1.1 TITLE			Change Addition
NAME	BOOKE, MAX		1.2 NAME			
STREET ADDRESS	2110 PARK PLACE		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	PONT VEDRA BCH FL		1.4 CITY -	ST-ZIP		
TITLE	STD	DELETE	2.1 TITLE	ĺ		Change Addition
NAME	CHRISTOPHERSEN, CHARLE	5	2.2 NAME			
STREET ADDRESS CITY-ST-ZIP	574 FRINK AVE. SEBASTIAN FL		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
TITLE	D DEDAGTIAN FL	DELETE	2. 4 CHY-	51-21		Change Addition
NAME	SOASH, MARJORIE	_	3.2 NAME			
STREET ADDRESS	4410 N A1A, #306			T ADDRESS		
CITY-ST-ZIP	VERO BCH FL		3.4 CITY-			
TITLE	D	DELETE	4.1 TITLE		PRES.D	Change Addition
NAME	GURNEY, LEEDS	• •	4. 2 NAME		WILLIAM COLLIUS	
STREET ADDRESS	617 INTERLACHEN AVENUE			T ADDRESS	4400 N. AIA #10	
CITY-ST-ZIP	WINTER PARK FL	N nevere	4.4 CITY -	ST-ZIP	VERO BEACH, FL. 3296	☐ Change
TITLE NAME	PD HATEV IACK	DETELE	5.1 TITLE		Δ.	Change De Addition
STREET ADDRESS	HIVLEY, JACK 37428 HARLOW DRIVE		5.2 NAME		LEWIS HOLT 4400 N.AIA #16	
CITY-ST-ZIP	WILLOUGHBY OH		5.4 CITY-		VERO BEACH, FL. 3296	. 7
TITLE	THE COUNTY OFF	DELETE	6.1 TITLE	er-£11	VERE WEARING FE. SKIE	Change Addition
NAME			6.2 NAME			•
STREET ADDRESS			6.3 STREE	T ADORESS		
				I		

14. Thereby 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 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 on an attachment with an address

SIGNATURE:

1-30-90

FILED

Feb 18 1998 8:00am

Secretary of State