2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State
02-20-2002 90008 049 ****61.25

DOCUMENT # 790972

1. Entity 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

B0026003

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
KEYSTONE PROPERTY MANAGEMENT GROUP, INC	SAME
Suite, Apt. #, etc.: 1717 20th St. Suite #102	Suite, Apt. #, etc.
City & State: VERO BEACH, FL.	City & State
Zip: 32960 Country	Zip Country

4. FEI Number: 59-1269013 ☐ 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
STEWART, WILLIAM J., ESQ. MCKINNON, STEWART, NALL & MCKINNON 3355 OCEAN DR. VERO BEACH FL 32963	Name: WILLIAM J. STEWART, ESQ. Street Address (P.O. Box Number is Not Acceptable): STEWART & EVANS, P.A. 3355 OCEAN DRIVE City: VERO BEACH FL Zip Code: 32963

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BOOKE, MAX 2110 PARK PLACE PONT VEDRA BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE-PRESIDENT LEEDS GURNEY 617 INTERLACHEN WINTER PARK, FL. 32789	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIKE, CHARLES 4400 N A1A # 11 VERO BEACH FL 32960	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR/VICE-PRESIDENT TOM BOOKE 1243 N.W. 11TH ST BOYNTON BEACH, FL 33426	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHRISTOPHERSON, CHRIS 4410 N A1A, #306 VERO BEACH FL 32960	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY GERAGHTY 104 FOREST ROAD LOUGHTON, ESSEX, ENGLAND IG10-1EQ	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COLLINS, WILLIAM 4400 N A1A #10 VERO BEACH FL 32923	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HIVELY, JACK 37428 HARLOW DR WILLOUGHBY OH 44094	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR WILLIAM NOBILE 955 RENSSELAER AVENUE STATEN ISLAND, NY 10309	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED 2/1/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #