


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000002057 1. Entity Name OCEANSIDE R.V. PARK OWNER'S ASSOCIATION, INC.	
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FILED
Feb 19, 2007 08:00 AM
Secretary of State

Principal Place of Business 18 EAST BRADLEY # 16 DESTIN, FL 32550	Mailing Address 18 EAST BRADLEY # 16 DESTIN, FL 32550
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01222007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
59-3862385

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent COFFIELD, P. COLLEEN 1719 S COUNTY HWY 393 SANTA ROSA BEACH, FL 32459
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILLILLAND, RICHARD D 18 EAST BRADLEY # 8 DESTIN, FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EARNST, JOHN 18 EAST BRADLEY # 16 DESTIN, FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIGNAC, DENISE 18 E. BRADLEY #1 DESTIN, FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/01/07-80038-009 61.25

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IN THIS SPACE**

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: John Earnest JOHN EARNEST 1/23/07 850-496-1820
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #