

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90018 040 \*\*\*\*61.25

**DOCUMENT # N10999**

1. Entity Name

OCEAN REEF MARINA CONDOMINIUM V ASSOCIATION, INC.



Principal Place of Business

Mailing Address

120 ANCHOR DR  
KEY LARGO FL 33037  
US

120 ANCHOR DR  
KEY LARGO FL 33037  
US

2. Principal Place of Business - No P.O. Box #

10 Barracuda Lane

Suite, Apt. #, etc.

3. Mailing Address

10 Barracuda Lane

Suite, Apt. #, etc.

City & State

Key Largo, FL

City & State

Key Largo, FL

Zip  
33037

Country  
USA

Zip  
33037

Country  
USA

4. FEI Number

59-2625912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

MOSS, EVELYN  
120 ANCHOR DR  
KEY LARGO FL 33037

7. Name and Address of New Registered Agent

Name

Moss, Evelyn

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

10 Barracuda Lane

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when renouncing)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: STD ☐ Delete  
NAME: MOSS, EVELYN  
STREET ADDRESS: 120 ANCHOR DR  
CITY-STATE-ZIP: KEY LARGO FL 33037

TITLE: PD ☐ Delete  
NAME: SILVERSTEIN, KLARA  
STREET ADDRESS: 120 ANCHOR DR  
CITY-STATE-ZIP: KEY LARGO FL 33037

TITLE: D ☒ Delete  
NAME: CLARKE, VICTOR  
STREET ADDRESS: 120 ANCHOR DR  
CITY-STATE-ZIP: KEY LARGO FL 33037

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: STD ☒ Change ☐ Addition  
NAME: Moss, Evelyn  
STREET ADDRESS: 10 Barracuda Lane  
CITY-STATE-ZIP: Key Largo, FL 33037

TITLE: PD ☒ Change ☐ Addition  
NAME: Silverstein, Klara  
STREET ADDRESS: 10 Barracuda Lane  
CITY-STATE-ZIP: Key Largo, FL 33037

TITLE: D ☐ Change ☒ Addition  
NAME: Finley, Larry  
STREET ADDRESS: 10 Barracuda Lane  
CITY-STATE-ZIP: Key Largo, FL 33037

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Evelyn Moss*

Evelyn Moss

4/23/07

305-367-3232

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #