

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90047 001 ***361.25

DOCUMENT # N92000000498

1. Entity Name
OCEAN REEF CLUB, INC.



Principal Place of Business
**35 OCEAN REEF DRIVE
SUITE 200
KEY LARGO, FL 33037**

Mailing Address
**35 OCEAN REEF DRIVE
SUITE 200EO
KEY LARGO, FL 33037**

66010910



05022008 Chg-NP CR2E037 (12/06)

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0371142

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

**LUBAN, KENNETH A
35 OCEAN REEF DR
STE 200 EO
KEY LARGO, FL 33037**

Name

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

City

FL

Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 12, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CD** ☒ Delete
NAME **KLENBAAS, RONALD A**
STREET ADDRESS **35 OCEAN REEF DR STE 200 EO**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **CD** ☐ Change ☒ Addition
NAME **NELSON M. SIMS**
STREET ADDRESS **35 OCEAN REEF DRIVE, # 200**
CITY-ST-ZIP **Key Largo, FL 33037**

TITLE **SVP** ☐ Delete
NAME **LUBAN, KENNETH A**
STREET ADDRESS **35 OCEAN REEF DR STE 200 EO**
CITY-ST-ZIP **KEY LARGO, FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☐ Delete
NAME **ASTBURY, PAUL M.G.**
STREET ADDRESS **35 OCEAN REEF DR STE 200 EO**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VATS** ☒ Delete
NAME **CARDER, SUZANNE**
STREET ADDRESS **35 OCEAN REEF DR STE 200 EO**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **VAT** ☐ Change ☒ Addition
NAME **Ruford D. Franklin, III**
STREET ADDRESS **35 Ocean Reef Drive, # 200**
CITY-ST-ZIP **Key Largo, FL 33037**

TITLE **VP** ☐ Delete
NAME **DUNCAN, JOHN E**
STREET ADDRESS **35 OCEAN REEF DRIVE, STE EO 200**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Kenneth A. Luban

5/6/08

305-367-5850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #