

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 05 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000890 (4)

1. Corporation Name

OCEAN BREEZE PARK WEST TENANTS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

101 11TH ST.
MARATHON FL 33050

101 11TH ST.
MARATHON FL 33050

3. Date Incorporated or Qualified
02/12/1993

3a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENMAN, FRANKLIN D P.A.
5800 OVERSEAS HWY.
SUITE 40
MARATHON FL 33050

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D/T ☒ DELETE
NAME DORAN, DIANE
STREET ADDRESS 101 11TH ST 33
CITY-ST-ZIP MARATHON FL

1.1 TITLE D/T ☐ Change ☒ Addition
1.2 NAME Meunier, Deborah
1.3 STREET ADDRESS 101 11th St, Lot #11
1.4 CITY-ST-ZIP MARATHON, FLA 33050

TITLE DP ☒ DELETE
NAME MANCINI, RICHARD
STREET ADDRESS 51 HILLSIDE ST RIVER PLAZA
CITY-ST-ZIP RED BANK NJ

2.1 TITLE DP ☐ Change ☒ Addition
2.2 NAME Ides, Matthew
2.3 STREET ADDRESS 596 Swain
2.4 CITY-ST-ZIP Elmhurst, ILL 60126

TITLE DS ☐ DELETE
NAME GOODMAN, JAN
STREET ADDRESS 101 11TH STREET, #30
CITY-ST-ZIP MARATHON FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DVP ☐ DELETE
NAME CARLSON, JACK
STREET ADDRESS 101 11TH ST 2
CITY-ST-ZIP MARATHON FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME MASON, BUD
STREET ADDRESS BOX 34 N/A
CITY-ST-ZIP GEORGE TOWN NY 13072

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME JAROS, KEN
STREET ADDRESS 280 MIDDAGH RD. 97TH ST
CITY-ST-ZIP LEMONT IL 60439

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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:

Deborah A. Meunier
Registered Agent

2/21/96

305 289-1411

CR2E037 (9/96)