

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711161

**FILED**  
**Jan 07, 2014**  
**Secretary of State**  
**CC0958677251**

**Entity Name:** OLS HOME ASSOCIATION, INC.

**Current Principal Place of Business:**

3450 KILMARNOCH LANE  
TITUSVILLE, FL 32781

**Current Mailing Address:**

P O BOX 861  
TITUSVILLE, FL 32780 US

**FEI Number:** 23-7075601

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ABATE, PAUL TSR  
1245 RANCHERO AVE  
TITUSVILLE, FL 32780 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            ABATE, PAUL TSR  
Address        1245 RANCHERO AVE  
City-State-Zip: TITUSVILLE, FL 32780

Title            TREA  
Name            SYLVESTER, PETER  
Address        3350 LAKE HARNEY CL  
City-State-Zip: GENEVA FL 32732

Title            SECR  
Name            NORTON, THOMAS J  
Address        303 READING AVE  
City-State-Zip: TITUSVILLE FL 32796

Title            PGK  
Name            EHRIG            , JOHN            F  
Address        1418 LITTLER DR  
City-State-Zip: TITUSVILLE FL 32780

Title            PDD  
Name            OLKA, MICHAEL H  
Address        3318 VIRGINIA DR  
City-State-Zip: TITUSVILLE FL 32796

Title            VP  
Name            BRAUN, JAMES    J  
Address        4437 OLYMPIC DR  
City-State-Zip: COCOA FL 32927

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL T ABATE SR

**PRESIDENT**

**01/07/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date