

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718731

Entity Name: ORMOND-BY-THE-SEA ASSOCIATION, INC.**Current Principal Place of Business:**1601 OCEANSHORE BLVD.
ORMOND BEACH, FL 32176**Current Mailing Address:**1601 OCEANSHORE BLVD.
ORMOND BEACH, FL 32176**FEI Number:** 59-2314359**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ATLANTIC SHORES MANAGEMENT
3511 S PENINSULA DRIVE
PORT ORANGE, FL 32127 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:** MARK ROSKAMP

01/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name WEEKS, ROBERT
Address 7250 CAPILANO DRIVE
City-State-Zip: SOLON OH 44139-5235

Title VP
Name EZZO, EARL
Address 5170 INDIAN OCEAN LOOP
City-State-Zip: TAVARES FL 32778

Title PRESIDENT
Name NEWTON, RON
Address 911 ASHFORD COURT
City-State-Zip: BRENTWOOD TN 37027

Title SECRETARY
Name COOPER, EMILY
Address 2564 MILLPOND DRIVE
City-State-Zip: DULUTH GA 30096

Title DIRECTOR
Name PRZCLAWSKI, JOHN
Address 3352 STERLING LANE
City-State-Zip: ORLANDO FL 32817

Title DIRECTOR
Name WALLS, SUSAN
Address 421 EVERGREEN
City-State-Zip: HIAWASSEE GA 30546

Title DIRECTOR
Name THOMAS, HOWARD
Address 839 INDEPENDENCE
City-State-Zip: SPRINGFIELD IL 62702

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: EARL EZZO

VICE PRESIDENT

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date