

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002592

Entity Name: THE PROTESTANT CONGREGATION OF OCEAN REEF, INC.**FILED**
Apr 27, 2022
Secretary of State
1349104358CC**Current Principal Place of Business:**THE PROTESTANT CONGREGATION OF OCEAN REEF
31 OCEAN REEF DRIVE C101-248
KEY LARGO, FL 33037**Current Mailing Address:**THE PROTESTANT CONGREGATION OF OCEAN REEF
31 OCEAN REEF DRIVE C101-248
KEY LARGO, FL 33037 US**FEI Number: 65-1002109****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LYNN, SANDRA TESQ.
7 BARRACUDA LANE
KEY LARGO, FL 33037 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	ASST. TREASURER	Title	SECRETARY
Name	VASQUEZ, MARY D	Name	GUDICELLO, FRANK
Address	THE PROTESTANT FOUNDATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248	Address	THE PROTESTANT CONGREGATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037
Title	VC	Title	DIRECTOR
Name	HARTZ, CHUCK	Name	STREIT, CHRIS
Address	THE PROTESTANT CONGREGATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248	Address	THE PROTESTANT CONGREGATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037
Title	CHAIRMAN	Title	DIRECTOR
Name	ST CLAIR, PACK	Name	WATSON, BOBBIE
Address	THE PROTESTANT CONGREGATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248	Address	THE PROTESTANT CONGREGATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037
Title	DIRECTOR	Title	DIRECTOR
Name	CILLEY, LORI	Name	FISCHER, JERRY
Address	THE PROTESTANT CONGREGATION OF OCEAN REEF 31 OCEAN REEF DRIVE C101-248	Address	31 OCEAN REEF DRIVE C101-248
City-State-Zip:	KEY LARGO FL 33037	City-State-Zip:	KEY LARGO FL 33037

Continues on page 2*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: PACK ST CLAIR****CHAIRMAN****04/27/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TRUCHAN, PAM
Address 31 OCEAN REEF DRIVE
 C101-248
City-State-Zip: KEY LARGO FL 33037

Title TREASURER
Name RICE, WILLIAM
Address 31 OCEAN REEF DRIVE
 C101-248
City-State-Zip: KEY LARGO FL 33037