

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00811

**FILED
Apr 17, 2018
Secretary of State
CC2892102261**

Entity Name: OSPREY CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE 100
STUART, FL 34994

Current Mailing Address:

C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE 100
STUART, FL 34994 US

FEI Number: 59-2382041

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS EARLE & BONAN, P.A.
789 S. FEDERAL HIGHWAY
STE. 101
STUART, FL 34994 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 SECRETARY
Name SCHOENBRUN, STEPHEN DR.
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PARKWAY SUITE 100
City-State-Zip: STUART FL 34994

Title PD
Name PROVINES, STEVE
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PARKWAY SUITE 100
City-State-Zip: STUART FL 34994

Title TREASURER
Name FOSSETT, LEE
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PARKWAY SUITE 100
City-State-Zip: STUART FL 34994

Title VPD
Name CHURCHILL, JAMES
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PARKWAY SUITE 100
City-State-Zip: STUART FL 34994

Title VP
Name DENNENBERG, ELLIS
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PARKWAY SUITE 100
City-State-Zip: STUART FL 34994

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: STEVE PROVINES

PRESIDENT

04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date