

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004010

Entity Name: OC HOMEOWNER ASSOCIATION, INC.**Current Principal Place of Business:**350 N CAUSEWAY
NEW SMYRNA BEACH, FL 32169**Current Mailing Address:**350 N CAUSEWAY
NEW SMYRNA BEACH, FL 32169**FEI Number:** 59-3735713**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WRIGHT, THOMAS D
340 N CAUSEWAY
NEW SMYRNA BCH, FL 32169 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	T
Name	SARGE, DONALD
Address	2815 BAY SIDE DR
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	VP
Name	MCCANN, BRIAN
Address	2833 OSPREY COVE DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	P
Name	POELTLER, TOM
Address	2811 OSPREY COVE DR
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	SECRETARY
Name	THIBAUDEAU, BARBARA
Address	2831 OSPREY COVE DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

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: DONALD SARGE**TREASURER****03/21/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date