

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008332

**Entity Name:** OSPREY HARBOR VILLAGE MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

14001 BELLAGIO WAY  
OSPREY, FL 34229

**Current Mailing Address:**

14001 BELLAGIO WAY  
OSPREY, FL 34229

**FEI Number: 20-2681564**

**Certificate of Status Desired: No**

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

COASTAL LIVING REAL ESTATE & PROP. MGMT.  
14001 BELLAGIO WAY  
OSPREY, FL 34229 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 NADOLSKI, LEN  
Address 5000 E. GRAND RIVER  
City-State-Zip: HOWELL MI 48843

Title VP  
Name ZENDER, MICHAEL  
Address 716 SILK OAK DR  
City-State-Zip: VENICE FL 34293

Title OFFICER  
Name LUDWIG, DALE  
Address 14021 BELLAGIO WAY #209  
City-State-Zip: OSPREY FL 34229

Title TREASURER  
Name MANGIE, JIM  
Address 1810 NORTH LAKESHORE DR  
City-State-Zip: SARASOTA FL 34231

Title PRESIDENT  
Name OLIVER, SIMON  
Address 14021 BELLAGIO WAY #301  
City-State-Zip: OSPREY FL 34229

*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: SIMON OLIVER**

**PRESIDENT**

**03/08/2016**

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

\_\_\_\_\_  
Date