

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29758

**Entity Name:** OCEAN HOUSE AT INDIAN RIVER PLANTATION  
CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

625 SE CENTRAL PARKWAY  
STUART, FL 34994

**Current Mailing Address:**

625 SE CENTRAL PARKWAY  
STUART, FL 34994 US

**FEI Number: 66-0097379**

**Certificate of Status Desired: No**

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

KAZMIER, TIMOTHY D.  
625 SE CENTRAL PARKWAY  
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: TIMOTHY D. KAZMIER

04/13/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TD	Title	DIRECTOR, SECRETARY
Name	WHITE, JANICE	Name	TOPLIAN, PETE
Address	579 NE PLANTATION ROAD	Address	579 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996	City-State-Zip:	STUART FL 34996
Title	PRESIDENT	Title	VPD
Name	HADTKE, FRED	Name	DIANIS, DAVE
Address	579 NE PLANTATION ROAD	Address	579 NE PLANTATION ROAD
City-State-Zip:	STUART FL 34996	City-State-Zip:	STUART FL 34996
Title	MANAGER	Title	DIRECTOR, VP
Name	KAZMIER, TIMOTHY D.	Name	WILLIAMS, SHAWN
Address	625 SE CENTRAL PARKWAY	Address	579 NE PLANTATION
City-State-Zip:	STUART FL 34994	City-State-Zip:	STUART FL 34996

*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: TIMOTHY D. KAZMIER

MANAGER

04/13/2018

Electronic Signature of Signing Officer/Director Detail

Date