2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2021
Secretary of State
1252075148CC

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Entity Name: OCEAN REEF CHAPEL FOUNDATION, INC.

Current Principal Place of Business:

32 OCEAN REEF DRIVE
KEY LARGO, FL 33037

Current Mailing Address:

P.O. BOX 226
SAINT AUGUSTINE, FL 32085-0226 US

FEI Number: 65-0486471

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHEELER, GAIL
32 OCEAN REEF DRIVE
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: GAIL WHEELER 04/18/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	CALLSEN, CHRISTIAN
Address	50 CLUBHOUSE ROAD KEY LARGO
City-State-Zip:	KEY LARGO FL 33037

Title	TREASURER
Name	WILLIAM, RICE P
Address	78 PUMPKIN CAY ROAD
City-State-Zip:	KEY LARGO FL 33037

Title	VP
Name	CARDONE, MICHAEL
Address	31 OCEAN REEF DRIVE C101-295
City-State-Zip:	KEY LARGO FL 33037

Title	DIRECTOR
Name	SCOTT, SUSAN
Address	21 HALFWAY ROAD
City-State-Zip:	KEY LARGO FL 33037

Title	SD
Name	WHEELER, GAIL
Address	825 ANASTASIA BLVD UNIT A8
City-State-Zip:	SAINT AUGUSTINE FL 32080

Title	DIRECTOR
Name	FERRARONE, NED
Address	36 HALFWAY ROAD
City-State-Zip:	KEY LARGO FL 33037

Title	DIRECTOR
Name	BAHL, WILLIAM
Address	3 HARBOR LANE
City-State-Zip:	KEY LARGO FL 33037

Title	DIRECTOR
Name	SIMS, NELSON
Address	24 DOCKSIDE LANE PMB 41
City-State-Zip:	KEY LARGO FL 33037

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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: GAIL WHEELER CORPORATE SECRETARY 04/18/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GUYTON, GAIL
Address	22 HALFWAY ROAD
City-State-Zip:	KEY LARGO FL 33037

Title	DIRECTOR
Name	HIRSCHBIEL, SUSAN
Address	36 THATCH PALM WAY
City-State-Zip:	KEY LARGO FL