

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003809

**FILED**  
**Jan 26, 2015**  
**Secretary of State**  
**CC4628826613**

**Entity Name:** OCEANSIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

199 OCEANSIDE BOULEVARD  
INDIALANTIC, FL 32903

**Current Mailing Address:**

PO BOX 33160  
INDIALANTIC, FL 32903

**FEI Number: 59-3631771**

**Certificate of Status Desired: No**

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

BAYSIDE MANAGEMENT SERVICES  
199 OCEANSIDE BLVD  
INDIALANTIC, FL 32903 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            PRESIDENT  
Name            ALOISE, RANDY  
Address        3072 JACOBABEUS  
City-State-Zip: INDIALANTIC FL 32903

Title            DIRECTOR  
Name            WARREN, STEPHEN  
Address        3329 POSEIDON WAY  
City-State-Zip: INDIALANTIC FL 32903

Title            SECRETARY  
Name            REYNOLDS, JOYCE  
Address        610 BISMARCK  
City-State-Zip: INDIALANTIC FL 32903

Title            T  
Name            SNYDER, WILLIAM  
Address        393 INTREPID WAY  
City-State-Zip: INDIALANTIC FL 32903

Title            VP  
Name            SPURLIN, JERE  
Address        3041 PURPLE MARTIN  
City-State-Zip: INDIALANTIC FL 32903

*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: RANDY ALOISE**

**PRESIDENT**

**01/26/2015**

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

\_\_\_\_\_  
Date