

CK 2160

1. Name of company or name of individual (not fictitious name or d/b/a):  
Ocean Palms Beach Club, Inc.

\$100.00

2. Name under which applicant will do business (fictitious name, etc.):  
Ocean Palms Beach Club Inc.

MC

3. Official mailing address:  
Street: 2601 S. Atlantic Ave.

P.O. Box: \_\_\_\_\_

City: New Smyrna Beach

State: Florida Zip: 32169

DEPOSIT DATE

4. Florida address:  
Street: 2601 S Atlantic Ave

D2610 OCT 10 2002

P.O. Box: \_\_\_\_\_

City: New Smyrna Beach

State: Florida Zip: 32169

5. Structure of organization:
- ( ) Individual
  - Corporation
  - ( ) General Partnership
  - ( ) Limited Partnership
  - ( ) Other: \_\_\_\_\_

6. If incorporated in Florida, provide proof of authority to operate in Florida:

Florida Secretary of State  
Corporate Registration Number: 763851

- AUS \_\_\_\_\_
- CAF \_\_\_\_\_
- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- MMS \_\_\_\_\_
- SEC 1
- OTH \_\_\_\_\_

Form PSC/CMU-32 (02/99)  
Required by Commission Rule Nos. 25-24.510 & 25-24.511  
File Name: cmu-32.doc