

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720317

**FILED
Mar 22, 2014
Secretary of State
CC1221170919**

Entity Name: OAK GROVE VILLAGE PARK, INC.

Current Principal Place of Business:

1711 NE 134 ST
TRENTON, FL 32693

Current Mailing Address:

13460 NE 16TH TERRACE
TRENTON, FL 32693 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIGLER, SHIRLEY M
13351 NE 16TH AVENUE
TENTON, FL 32693 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: SHIRLEY M SIGLER

03/22/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title ST
Name SIGLER, SHIRLEY
Address 13351 NE 16TH AVENUE
City-State-Zip: TRENTON FL 32693

Title P
Name BAKER, GARY
Address 13460 NE 16TH TERRACE
City-State-Zip: TRENTON FL 32693

Title VP
Name POPE, RICHARD
Address 13350 NE 16TH AVENUE
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name SMITH, DON
Address 1650 NE 132 LANE
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name MAUPIN, JAMES
Address 13370 NE 17TH COURT
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name WOOD, MARGE
Address 13310 NE 15TH AVENUE
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name WENDT, CHARLES
Address 13330 NE 15TH AVENUE
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name ROTH, DEAN
Address 1770 NE 132 LANE
City-State-Zip: TRENTON FL 32693

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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: SHIRLEY M SIGLER

SECRETARY/TREASURER 03/22/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name POPE, KATHLENE
Address 13350 NE 16TH AVENUE
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name SIGLER, JOHN
Address 13351 NE 16TH AVENUE
City-State-Zip: TRENTON FL 32693

Title DIRECTOR
Name MCCLAIN, ED
Address 13351 NE 19TH AVENUE
City-State-Zip: TRENTON FL 32693