

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750250

FILED
Mar 14, 2024
Secretary of State
1728860642CC

Entity Name: OAKHURST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

CASEY CONDOMINIUM MANAGEMENT
4370 S. TAMIAMI TRAIL 102
SARASOTA, FL 34231

Current Mailing Address:

CASEY CONDOMINIUM MANAGEMENT
4370 S. TAMIAMI TRAIL 102
SARASOTA, FL 34231 US

FEI Number: 59-2093754

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASEY CONDOMINIUM MANAGEMENT
CASEY CONDOMINIUM MANAGEMENT
4370 S. TAMIAMI TRAIL 102
SARASOTA, FL 34231 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: BRIDGET SPENCE

03/14/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name PHILLIPS, MARGIE
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title PRESIDENT, TREASURER
Name RANDOLPH, TIPTON
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name NOVARRO, SANDRA
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title ASSISTANT SECRETARY
Name SPENCE, BRIDGET
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title VP
Name SMITH, DENNIS
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name SYLVAIN, LINDA
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name PASQUALE, ANNA
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name GODA, JOE
Address CASEY CONDOMINIUM
MANAGEMENT
4370 S. TAMIAMI TRAIL 102
City-State-Zip: SARASOTA FL 34231

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: BRIDGET SPENCE

ASSISTANT SECRETARY 03/14/2024

