

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00504

**Entity Name:** OAKBROOK CONDOMINIUM ASSOCIATION OF CLEARWATER, INC.

**FILED**  
**May 01, 2023**  
**Secretary of State**  
**8310909741CC**

**Current Principal Place of Business:**

2225 NURSERY RD.  
CLEARWATER, FL 33764

**Current Mailing Address:**

C/O KIMBALL KEY, LLC  
PO BOX 21051  
TAMPA, FL 33622 US

**FEI Number: 11-2854658**

**Certificate of Status Desired: No**

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

REED, JERILYN H  
HILL WARD HENDERSON  
101 E KENNEDY BLVD, STE 3700  
TAMPA, FL 33602 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: JERILYN H REED**

**05/01/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PDSD	Title	VP
Name	GREIDER, DAVID K	Name	SMITH, WILLIAM T
Address	C/O KIMBALL KEY, LLC PO BOX 21051	Address	2225 NURSERY RD LEASING CENTER
City-State-Zip:	TAMPA FL 33622	City-State-Zip:	CLEARWATER FL 33764
Title	ST		
Name	AUGE, MELISSA		
Address	2225 NURSERY RD LEASING CENTER		
City-State-Zip:	CLEARWATER FL 33764		

*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: DAVID K GREIDER**

**PRESIDENT**

**05/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date