

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

DOCUMENT# N04000005294

**FILED**  
**Jan 16, 2015**  
**Secretary of State**  
**CC8788013193**

**Entity Name:** OAKFORD ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

200 LAKE MORTON DRIVE  
LAKELAND, FL 33801

**Current Mailing Address:**

PO BOX 1551  
HIGHLAND CITY , FL 33846 US

**FEI Number: 32-0109289**

**Certificate of Status Desired: No**

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

HUMMEL, BEAU  
5446 OAKFORD DR.  
LAKELAND, FL 33812 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 PD  
Name HUMMEL, BEAU  
Address 5446 OAKFORD DRIVE  
City-State-Zip: LAKELAND FL 33812

Title DV  
Name LOPIPERO, TOM  
Address 5440 OAKFORD DRIVE  
City-State-Zip: LAKELAND FL 33812

Title TD  
Name SLAUGHTER, TRIXY  
Address 5577 FISCHER DRIVE  
City-State-Zip: LAKELAND FL 33812

*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: TRIXY SLAUGHTER**

**TREASURER**

**01/16/2015**

Electronic Signature of Signing Officer/Director Detail

Date