

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04646

Entity Name: OAK FOREST HOMEOWNERS/CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

OAK FOREST STREET
P O BOX 155
FLORAL CITY, FL 34436

Current Mailing Address:

P.O. BOX 155
FLORAL CITY, FL 34436

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POE, GARY A
103 N APOPKA AVE
(AT COURTHOUSE SQUIRE)
INVERNESS, FL 34452 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 P
Name JOHNSON, RICHARD
Address P.O. BOX 155
City-State-Zip: FLORAL CITY FL 34436

Title V
Name GILDEA, RICHARD
Address P.O. BOX 155
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR
Name KELLER, LORETTA
Address P.O. BOX 155
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR
Name JOHNSON, RICHARD
Address P.O. BOX 155
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR
Name WILLIAMS, HAROLD
Address P.O. BOX 155
City-State-Zip: FLORAL CITY FL 34436

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: BECKYSUE ROBINSON

SECRETARY

10/07/2019

Electronic Signature of Signing Officer/Director Detail

Date