

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000823

**FILED**  
**Jan 30, 2014**  
**Secretary of State**  
**CC4329890131**

**Entity Name:** OAK CROSSING MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

544 WILLET CIRCLE  
AUBURNDALE, FL 33823

**Current Mailing Address:**

544 WILLET CIRCLE  
AUBURNDALE, FL 33823

**FEI Number:** 20-3327736

**Certificate of Status Desired:** No

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

TOTAL PROPERTY MANAGEMENT OF CENTRAL FLA.  
544 WILLET CIRCLE  
AUBURNDALE, FL 33823 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 D  
Name NITSCHKE, ERIC  
Address 597 WILLET CIRCLE  
City-State-Zip: AUBURNDALE FL 33823

Title D  
Name HYDE, KIMBERLY  
Address 548 PINTAIL CIRCLE  
City-State-Zip: AUBURNDALE FL 33823

Title D  
Name WHITING, ERIC  
Address 508 PINTAIL CIRCLE  
City-State-Zip: AUBURNDALE FL 33823

*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:** ERIC WHITING

**DIRECTOR**

**01/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date