# DOCUMENT# N14000003237

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE OAK COVE HOME OWNERS ASSOCIATION, INC.

#### **Current Principal Place of Business:**

11301 SE 189TH TERRACE OCKLAWAHA, FL 32179

## **Current Mailing Address:**

PO BOX 872 OCKLAWAHA, FL 32179

## FEI Number: 86-1168596

## Name and Address of Current Registered Agent:

CASSARA, SAMUEL J 11301 SE 189TH TERRACE OCKLAWAHA, FL 32179 US Secretary of State CC8556400186

FILED Mar 26, 2016

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

Title	PRES	Title	VP
Name	CASSARA, SAMUEL J	Name	MITCHELL, FAYE
Address	11301 SE 189TH TERRACE	Address	11345 SE 188TH AVENUE
City-State-Zip:	OCKLAWAHA FL 32179	City-State-Zip:	OCKLAWAHA FL 32179
Title	SEC	Title	TREA
Name	HALL, HANS	Name	CASSARA, LINDA
Address	11417 SE 189TH AVENUE	Address	11301 SE 189TH TERRACE
City-State-Zip:	OCKLAWAHA FL 32179	City-State-Zip:	OCKLAWAHA FL 32179

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: SAMUEL J CASSARA

PRESIDENT

03/26/2016

Date

Electronic Signature of Signing Officer/Director Detail

Date