2695 DOBBS R	ncipal Place of Business: ROAD TINE, FL 32086		4808858	1400CC
Current Mai	iling Address:			
2695 DOBB SAINT AUG	S ROAD USTINE, FL 32086 US			
FEI Number: 59-2943057			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
ALLIANCE REALTY AND MANAGEMENT 2695 DOBBS ROAD SAINT AUGUSTINE, FL 32086 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.				
		clored ennee er regie	torou ugoni, or soun, in the olute of the	nuu.
	E: CINDY CHAPMAN			04/18/2022
	E: CINDY CHAPMAN Electronic Signature of Registered Agent			04/18/2022
SIGNATURE	E: CINDY CHAPMAN Electronic Signature of Registered Agent	Title	PRESIDENT	04/18/2022
SIGNATURE Officer/Dire	E: CINDY CHAPMAN Electronic Signature of Registered Agent ctor Detail :			04/18/2022
SIGNATURE Officer/Dire	E: CINDY CHAPMAN Electronic Signature of Registered Agent Ctor Detail : SECRETARY	Title	PRESIDENT	04/18/2022
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : SECRETARY MAXWELL, HARRY 2695 DOBBS ROAD	Title Name	PRESIDENT LEMROW, THOMAS 2695 DOBBS ROAD	04/18/2022
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : SECRETARY MAXWELL, HARRY 2695 DOBBS ROAD	Title Name Address	PRESIDENT LEMROW, THOMAS 2695 DOBBS ROAD	04/18/2022
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E: CINDY CHAPMAN Electronic Signature of Registered Agent Ctor Detail : SECRETARY MAXWELL, HARRY 2695 DOBBS ROAD SAINT AUGUSTINE FL 32086	Title Name Address City-State-Zip:	PRESIDENT LEMROW, THOMAS 2695 DOBBS ROAD SAINT AUGUSTINE FL 32086	04/18/2022
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	E: CINDY CHAPMAN Electronic Signature of Registered Agent Ctor Detail : SECRETARY MAXWELL, HARRY 2695 DOBBS ROAD SAINT AUGUSTINE FL 32086 TREASURER	Title Name Address City-State-Zip: Title	PRESIDENT LEMROW, THOMAS 2695 DOBBS ROAD SAINT AUGUSTINE FL 32086 VP	04/18/2022
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title Name	E: CINDY CHAPMAN Electronic Signature of Registered Agent Ctor Detail : SECRETARY MAXWELL, HARRY 2695 DOBBS ROAD SAINT AUGUSTINE FL 32086 TREASURER WALER , RICHARD 2695 DOBBS ROAD	Title Name Address City-State-Zip: Title Name	PRESIDENT LEMROW, THOMAS 2695 DOBBS ROAD SAINT AUGUSTINE FL 32086 VP EMMEL, DAVID 2695 DOBBS ROAD	04/18/2022

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.

Name

Address

City-State-Zip:

SIGNATURE: CHRISTINE CLYMER

CLYMER, CHRISTINE

2695 DOBBS ROAD

City-State-Zip: SAINT AUGUSTINE FL 32086

Name

Address

Electronic Signature of Signing Officer/Director Detail

BATES, BENJIE

2695 DOBBS ROAD

SAINT AUGUSTINE FL 32086

04/18/2022

## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT FILED

## Entity Name: OAKBROOK PROPERTY OWNERS' ASSOCIATION, INC.

DOCUMENT# N27288

Apr 18, 2022 Secretary of State 4808858453CC