

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32238

**Entity Name:** OAK BEND MOBILE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

OAKBEND MHA, INC.  
14822 CATRINA LOOP  
HUDSON, FL 34667

**Current Mailing Address:**

OAKBEND MHA, INC.  
14822 CATRINA LOOP  
HUDSON, FL 34667 US

**FEI Number:** 59-1285198

**Certificate of Status Desired:** Yes

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

SIMLER, SUSAN  
14803 CATRINA LOOP  
HUDSON, FL 34667 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 DP  
Name STUDENNY, STEVE  
Address 14803 SHARK ST  
City-State-Zip: HUDSON FL 34667

Title DVP  
Name EVANS, MARGO  
Address 14800 CATRINA LOOP  
City-State-Zip: HUDSON FL 34667

Title DT  
Name ARTHUR, JILL  
Address 14739 CATRINA LOOP  
City-State-Zip: HUDSON FL 34667

Title DS  
Name RICH, RICHARD  
Address 14731 SWOOPS LOOP  
City-State-Zip: HUDSON FL 34667

Title DT  
Name TURKINGTON, CATHY  
Address 14817 SWOOPS LOOP  
City-State-Zip: HUDSON FL 34667

*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:** STEVE STUDENNY

PRESIDENT, HOA

03/14/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date