

2017 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 D/PRESIDENT
Name SUSAN, SIMLER
Address 14803 CATRINA LOOP
City-State-Zip: HUDSON FL 34667

Title D/, TRUSTEE
Name LUND, ROBERT
Address 14826 CATRINA LOOP
City-State-Zip: HUDSON FL 34667

Title DT/TREASURER
Name HUSSEY, PHYLLISL
Address 14803 SWOPES LOOP.
City-State-Zip: HUDSON FL 34667

Title D/SECRETARY
Name ROBARGE, PAT
Address 14814 SHARK STREET
City-State-Zip: HUDSON FL 34667

Title D/VP
Name MYERS, GARY
Address 14806 CATRINA 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: SUSAN SIMLER

DIRECTOR/PRESIDENT

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date