

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35346

**Entity Name:** OAK RIDGE ESTATES COMBINED PROPERTY OWNERS' ASSOCIATION, INC.

**FILED**  
**Feb 09, 2024**  
**Secretary of State**  
**2478931340CC**

**Current Principal Place of Business:**

32 GARCIA LANE  
FROSTPROOF, FL 33843

**Current Mailing Address:**

32 GARCIA LANE  
FROSTPROOF, FL 33843 US

**FEI Number: 80-0766791**

**Certificate of Status Desired: No**

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

CHILTON, ROBERT C  
245 SOUTH CENTRAL AVENUE  
BARTOW, FL 33830 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: ROBERT C CHILTON**

**02/09/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name FEBLES, RAYMOND  
Address 685 FAZZINI DR  
City-State-Zip: FROSTPROOF FL 33843

Title VPD  
Name RIVERA, ESGARDO  
Address 5 GARCIA LANE  
City-State-Zip: FROSTPROOF FL 33843

Title TD  
Name MILLER, BRENDA  
Address 32 GARCIA LANE  
City-State-Zip: FROSTPROOF FL 33843

Title SD  
Name TWAMLEY, TRISTA  
Address 24 GARCIA LANE  
City-State-Zip: FROSTPROOF FL 33843

Title DIRECTOR  
Name MILLER, BRIAN  
Address 32 GARCIA LANE  
City-State-Zip: FROSTPROOF FL 33843

*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: BRIAN MILLER**

**DIRECTOR**

**02/09/2024**

Electronic Signature of Signing Officer/Director Detail

Date