

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35797

**Entity Name:** OAKRIDGE PROPERTY OWNERS AND RECREATIONAL ASSOCIATION, INC.

**FILED**  
**Mar 09, 2014**  
**Secretary of State**  
**CC3338745846**

**Current Principal Place of Business:**

6055 WHISPERING OAK LOOP  
BEVERLY HILLS, FL 34465

**Current Mailing Address:**

C/O FREDERICK KOEHL, CPA  
P.O. BOX 2557  
CRYSTAL RIVER, FL 34423-2557 US

**FEI Number: 59-3006599**

**Certificate of Status Desired: No**

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

WINES, LUCY A  
6161 N MISTY OAK TER  
BEVERLY HILLS, FL 34465 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:** LUCY A WINES

03/09/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name TREBON, ARTHUR  
Address 76 W HONEY PALM LOOP  
City-State-Zip: BEVERLY HILLS FL 34465

Title VP  
Name DEBLITZ, CARL  
Address 6361 N MISTY OAK TER  
City-State-Zip: BEVERLY HILLS FL 34465

Title T  
Name WINES, JOHN  
Address 6161 N. MISTY OAK TERRACE  
City-State-Zip: BEVERLY HILLS FL 34465

Title S  
Name MURRAY, BARBARA  
Address 6420 N WHIPERING OAK LOOP  
City-State-Zip: BEVERLY HILLS FL 34465

Title D  
Name APPLEBY, ROBERT  
Address 6175 N WHITE PALM WAY  
City-State-Zip: BEVERLY HILLS FL 34465

*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:** JOHN WINES

**TREASURER**

03/09/2014

Electronic Signature of Signing Officer/Director Detail

Date