

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35797

**FILED**  
**Mar 03, 2018**  
**Secretary of State**  
**CC5203963651**

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

**Current Principal Place of Business:**

6055 WHISPERING OAK LOOP  
BEVERLY HILLS, FL 34465

**Current Mailing Address:**

C/O FREDERICK KOEHL, CPA  
P.O. BOX 2257  
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

03/03/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DAVIES, DIANA  
Address 141 W FOREST OAK PL  
City-State-Zip: BEVERLY HILLS FL 34465

Title DIRECTOR  
Name KEENAN, SUE  
Address 91 W FOREST OAK PL  
City-State-Zip: BEVERLY HILLS FL 34465

Title TREASURER  
Name SICILIANO, SAM  
Address 6082 N WHISPERING OAK LOOP  
City-State-Zip: BEVERLY HILLS FL 34465

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

Title DIRECTOR  
Name FOTI, JOSEPH  
Address 6435 N MISTY OAK TER  
City-State-Zip: BEVERLY HILLS FL 34465

Title DIRECTOR  
Name HUNT, JEANNE  
Address 6225 N WHISPERING OAK LOOP  
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:** DIANA DAVIES

**PRES**

03/03/2018

Electronic Signature of Signing Officer/Director Detail

Date