

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41478

**FILED**  
**Feb 08, 2019**  
**Secretary of State**  
**0803531138CC**

**Entity Name:** OAKMONT PLACE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

902C PALM BLVD S  
NICEVILLE, FL 32578

**Current Mailing Address:**

902C PALM BLVD S  
NICEVILLE, FL 32578 US

**FEI Number:** 59-3051542

**Certificate of Status Desired:** No

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

SAVAGE, JAMES  
1477 OAKMONT PLACE  
NICEVILLE, FL 32578 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:** JAMES SAVAGE

02/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title MGRM  
Name SAVAGE, JAMES  
Address 1471 OAKMONT PLACE  
City-State-Zip: NICEVILLE FL 32578

Title MGRM  
Name KIRKLAND, NATALIE  
Address 1463 OAKMONT PLACE  
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR  
Name NEWNOM, SYLVIA  
Address 1457 OAKMONT PLACE  
City-State-Zip: NICEVILLE FL 32578

*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:** JAMES SAVAGE

PRESIDENT

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date