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: BILL GARRETT

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

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:

Officer/Director	Detail :
------------------	----------

Title	TREASURER	Title	VP
Name	PROCTOR, VICTORIA	Name	HICKS, BOBBY
Address	5455 A1A SOUTH	Address	5455 A1A SOUTH
City-State-Zip:	SUITE 3 SAINT AUGUSTINE FL 32080	City-State-Zip:	SAINT AUGUSTINE FL 32080
Title	PRESIDENT	Title	S
		Name	MACHNIC, JOHN
Name	GARRETT, BILL		
		Address	5455 A1A SOUTH
Address	5455 A1A SOUTH SUITE 3	Address	5455 A1A SOUTH SUITE 3

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000830

Entity Name: THE OAKBRIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

240 CANAL BLVD SUITE 2 PONTE VEDRA BEACH, FL 32082

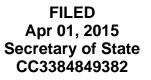
Current Mailing Address:

5455 A1A SOUTH SUITE 3 SAINT AUGUSTINE, FL 32080

FEI Number: 59-3370513

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES INC 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080 US



Certificate of Status Desired: No

04/01/2015 Date

Date