# 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: MICHAEL POSTON

Electronic Signature of Signing Officer/Director Detail

## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N96000002098

#### Entity Name: OAK CREST ESTATES ASSOCIATION, INC.

#### Current Principal Place of Business:

6903 OAKCREST WAY ZEPHYRHILLS, FL 33542

#### **Current Mailing Address:**

6903 OAKCREST WAY ZEPHYRHILLS, FL 33542 US

#### FEI Number: 59-3375527

### Name and Address of Current Registered Agent:

POSTON, MICHAEL 6903 OAKCREST WAY ZEPHYRHILLS, FL 33542 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	: MICHAEL POSTON			02/09/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	VP	
Name	TESSARO, CATHY	Name	METZGER, JOHN	
Address	6951 OAK CREST WAY	Address	6931 OAK CREST WAY	
City-State-Zip:	ZEPHYRHILLS FL 33542-1694	City-State-Zip:	ZEPHYRHILLS FL 33542	
Title	SECRETARY	Title	TREASURER	
Name	POSTON, MICHAEL	Name	ACREY, CYNTHIA	
Address	6903 OAK CREST WAY	Address	6920 OAKCREST WAY	
City-State-Zip:	ZEPHYRHILLS FL 33542	City-State-Zip:	ZEPHYRHILLS FL 33542	

Certificate of Status Desired: No

FILED Feb 09, 2024 Secretary of State 2174995615CC

> 02/09/2024 Date

SECRETARY