Entity Name: OAKBRIDGE PROPERTY OWNERS ASSOCIATION, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

751 PARK OF COMMERCE DRIVE 116 BOCA RATON, FL 33487

DOCUMENT# N9600002121

Current Mailing Address:

C/O TRAK PROPERTY MANAGEMENT GROUP 751 PARK OF COMMERCE DRIVE 116 BOCA RATON, FL 33487 US

FEI Number: 65-0670497

Name and Address of Current Registered Agent:

TUCKER & TIGHE PA 800 E BROWARD BLVD 710 FT. LAUDERDALE, FL 33301 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	THOMAS TIGHE		0	4/26/201
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	PRESIDENT	Title	DIRECTOR	
Name	ROBINSON, AMY	Name	KATZ, MARSHALL	
Address	751 PARK OF COMMERCE DRIVE 116	Address	751 PARK OF COMMERCE DRIVE 116	
City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	BOCA RATON FL 33487	
Title	SECRETARY	Title	т	
Name	NISENBAUM, BARBARA	Name	WELSBY, CECILE	
Address	751 PARK OF COMMERCE DRIVE 116	Address	751 PARK OF COMMERCE DRIVE 116	
City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	BOCA RATON FL 33487	
Title	VP	Title	D	
Name	GOODMAN, BATYA	Name	TAYLOR, CONRAD	
Address	751 PARK OF COMMERCE DRIVE 116	Address	751 PARK OF COMMERCE DRIVE 116	
City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	BOCA RATON FL 33487	
Title	PRESIDENT			
Name	HOEKENGA, RYAN			
Address	751 PARK OF COMMERCE DRIVE 116			
City-State-Zip:	BOCA RATON FL 33487			

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: CECILE WELSBY		TREASURER	04/26/2016
	Electronic Signature of Signing Officer/Director Detail		Date

Certificate of Status Desired: No