

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002681

**Entity Name:** OAKLAND POINTE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

30 OAKLAND POINTE CIRCLE  
OAKLAND, FL 34760

**Current Mailing Address:**

PO BOX 1011  
OAKLAND, FL 34760 US

**FEI Number:** 59-3425397

**Certificate of Status Desired:** No

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

POLLAND, RICK  
28 OAKLAND POINTE CIRCLE  
OAKLAND, FL 34760-0864 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:** RICK POLLAND

04/13/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name FABIANO, CASEY  
Address 6 OAKLAND POINTE CIRCLE  
City-State-Zip: OAKLAND FL 34760

Title VP  
Name PAULK, GERALD  
Address 1 OAKLAND POINTE CIRCLE  
City-State-Zip: OAKLAND FL 34760

Title TP  
Name MOORE, TRACEY  
Address 30 OAKLAND POINTE CIRCLE  
City-State-Zip: OAKLAND FL 34760

Title D  
Name BOUTON, LINDA  
Address 2 OAKLAND POINTE CIRCLE  
City-State-Zip: OAKLAND FL 34760

Title SD  
Name SEACHRIST, JASON  
Address 20 OAKLAND POINTE CIRCLE  
City-State-Zip: OAKLAND FL 34760

*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:** TRACEY MOORE

**TREASURER**

04/13/2014

Electronic Signature of Signing Officer/Director Detail

Date