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FILED

Mar 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **753821** (8)

1. Corporation Name

VILLAGE OF OAKWOOD LAKES, INC.

Principal Place of Business

Mailing Address

9876 OAKWOOD LAKES DR
BOYNTON BCH. FL 33436
US

3743 SILVERLACE LN.
BOYNTON BCH. FL 33436

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

2a. Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/18/1980

4. FEI Number

59-2259270

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

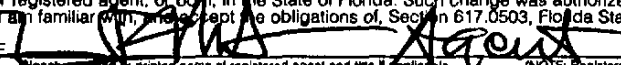
8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

MERRITT, JAMES R.
3743 SILVERLACE LANE
BOYNTON BEACH FL 33436

81 Name Associated Property Management
82 Street Address (P.O. Box Number is Not Acceptable)
400 South Dixie Hwy, #10
83
84 City Lake Worth FL 85 Zip Code 33460

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  Agent

3/12/98
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PERLMUTTER, FRED
STREET ADDRESS 3509 SILVERLACE LANE
CITY-ST-ZIP BOYNTON BCH, FL 00000

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME VPD
STREET ADDRESS KATTE, KENNETH
CITY-ST-ZIP 353 SILVERLACE LANE
BOYNTON BEACH FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME PD
STREET ADDRESS MERRITT, JIM
CITY-ST-ZIP 366 SILVERLACE LANE
BOYNTON BCH. FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME SD
STREET ADDRESS GOLDEN, NINDA
CITY-ST-ZIP 366 SILVERLACE LANE
BOYNTON BEACH FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME M
STREET ADDRESS DECOURT, JOHN
CITY-ST-ZIP 3726 SILVERLACE LN.
BOYNTON BEACH FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

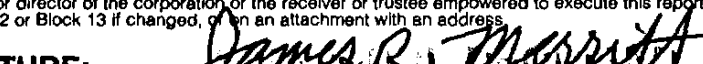
TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or supplemental annual report is true and accurate and that my 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 in
Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

CR2E037 (10/97)