

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724384

**Entity Name:** GLEN OAKS RIDGE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**GLEN OAKS RIDGE OWNERS ASSOCIATION, INC.  
1215 GLEN OAKS DRIVE EAST  
SARASOTA, FL 34232**Current Mailing Address:**GLEN OAKS RIDGE OWNERS ASSOCIATION, INC.  
1215 GLEN OAKS DRIVE EAST  
SARASOTA, FL 34232 US**FEI Number:** 59-1690454**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF  
4001 TAMiami TRAIL NORTH  
SUITE 270  
NAPLES, FL 34103 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:** DAVID G. MULLER, ESQUIRE

01/26/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	SECRETARY
Name	PURSLEY, LINDA P.
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

Title	TREASURER
Name	LUTES, STANLEY
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

Title	DIRECTOR
Name	GOEHRING, CURT
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

Title	DIRECTOR
Name	CRONIN, THOMAS
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

Title	DIRECTOR
Name	BUKAUSKAS, RUTA
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

Title	DIRECTOR
Name	HOWARD, DONNA
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

Title	PRESIDENT
Name	OHLRICH, KATHLEEN
Address	GLEN OAKS RIDGE OWNERS ASSOCIATION, INC. 1215 GLEN OAKS DRIVE EAST
City-State-Zip:	SARASOTA FL 34232

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:** LINDA PURSLEY

SECRETARY

01/26/2023

