2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725195

Entity Name: LIVE OAK VILLAGE CONDOMINIUM, INC.

Current Principal Place of Business:

2437 S. E. 17 STREET 201 OCALA, FL 34471

Current Mailing Address:

2437 S. E. 17 STREET 201 OCALA, FL 34471 US

FEI Number: 59-1525238

Name and Address of Current Registered Agent:

BOSSHARDT PROPERTY MANAGEMENT, LLC 2437 S. E. 17 STREET 201 OCALA, FL 34471 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

ctor Detail :		
PRESIDENT	Title	DIRECTOR
ANDERSON, HARRY	Name	HEIM, JIM
2437 S. E. 17 STREET 201	Address	2437 S. E. 17 STREET 201
OCALA FL 34471	City-State-Zip:	OCALA FL 34471
DIRECTOR	Title	TREASURER
VANDAL, BOB	Name	HEINTZ, STEVE
2437 S. E. 17 STREET 201	Address	2437 S. E. 17 STREET 201
OCALA FL 34471	City-State-Zip:	OCALA FL 34471
SECRETARY	Title	DIRECTOR
WRIGHT, PAM	Name	BURGERMEISTER, HERMAN
2437 S. E. 17 STREET 201	Address	2437 S. E. 17 STREET 201
OCALA FL 34471	City-State-Zip:	OCALA FL 34471
VP		
SCHAUT, RAY		
2437 S. E. 17 STREET 201		
OCALA FL 34471		
	PRESIDENT ANDERSON, HARRY 2437 S. E. 17 STREET 201 OCALA FL 34471 DIRECTOR VANDAL, BOB 2437 S. E. 17 STREET 201 OCALA FL 34471 SECRETARY WRIGHT, PAM 2437 S. E. 17 STREET 201 OCALA FL 34471 VP SCHAUT, RAY 2437 S. E. 17 STREET 201	PRESIDENTTitleANDERSON, HARRYName2437 S. E. 17 STREET 201Address201OCALA FL 34471City-State-Zip:DIRECTORTitleVANDAL, BOBName2437 S. E. 17 STREET 201Address201OCALA FL 34471City-State-Zip:SECRETARYTitleWRIGHT, PAM 2437 S. E. 17 STREET 201Name2437 S. E. 17 STREET 201AddressVPSCHAUT, RAYSCHAUT, RAY 2437 S. E. 17 STREET 201City-State-Zip:

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: HARRY ANDERSON PRESIDENT 02/02/2021 Electronic Signature of Signing Officer/Director Detail Date

FILED Feb 02, 2021 Secretary of State 0275187116CC

Certificate of Status Desired: No

Date