

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726559

Entity Name: SPRING OAKS HOMEOWNERS ASSOCIATION, INCORPORATED

FILED
Apr 30, 2024
Secretary of State
2112888771CC

Current Principal Place of Business:

629 GREENBRIAR BLVD
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

P.O. BOX 160232
ALTAMONTE SPRINGS, FL 32716-0232 US

FEI Number: 59-3454361

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVERA, MIGUEL
629 GREENBRIAR BLVD
ALTAMONTE SPRINGS, FL 32714 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: MIGUEL RIVERA

04/30/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name RIVERO, WILMARY
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title VP
Name LINK, LORI
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title TRUSTEE
Name THEDY, ANNETTE
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title TRUSTEE
Name DEVIA , LYDIA
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title PRESIDENT
Name RIVERA, MIGUEL
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title SECRETARY
Name FERRER, MICHELLE
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title TRUSTEE
Name GOMEZ, YVETTE
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title TRUSTEE
Name PAPP, ROY
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

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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: WILMARY RIVERO

TREASURER

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name BATTLE, JOHN
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232

Title TRUSTEE
Name EVANS, KATIE
Address P.O. BOX 160232
City-State-Zip: ALTAMONTE SPRINGS FL 32716-0232