

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732511

**FILED**  
**Mar 31, 2015**  
**Secretary of State**  
**CC3945427692**

**Entity Name:** SOUTHERN OAKS ASSOCIATION, INC.

**Current Principal Place of Business:**

12620-3 BEACH BLVD  
#301  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

12620-3 BEACH BLVD. #301  
JACKSONVILLE, FL 32246 US

**FEI Number:** 59-2488595

**Certificate of Status Desired:** No

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

JARNUTOWSKI, SHERRIE  
12620-3 BEACH BLVD. #301  
JACKSONVILLE, FL 32246 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:** SHERRIE JARNUTOWSKI

03/31/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           GARCIA, JAY  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           SECRETARY  
Name           RICHMOND, ROGER  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           TREASURER  
Name           MATTOT, JEANNE  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           VP  
Name           PODEJKO, VICTOR  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           DIRECTOR  
Name           VOGEL, ALTHEA  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           DIRECTOR  
Name           WOODS, BEVERLY  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           DIRECTOR  
Name           SHEEHAN, ELAINE  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

Title           DIRECTOR  
Name           YANCEY, JOHN  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246

**Continues on page 2**

*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:** JAY GARCIA

PRESIDENT

03/31/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            REUM, MICHELLE  
Address        12620-3 BEACH BLVD. #301  
City-State-Zip: JACKSONVILLE FL 32246