

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732511

**Entity Name:** SOUTHERN OAKS ASSOCIATION, INC.**Current Principal Place of Business:**INTERLACED PROPERTY SOLUTIONS  
2037 CARNES ST. #1  
ORANGE PARK, FL 32073**Current Mailing Address:**C/O INTERLACED PROPERTY SOLUTIONS  
2037 CARNES ST. #1  
ORANGE PARK, FL 32073 US**FEI Number:** 59-2488595**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INTERLACED PROPERTY SOLUTIONS  
INTERLACED PROPERTY SOLUTIONS  
2037 CARNES ST. #1  
ORANGE PARK, FL 32073 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:** PATRICIA BENNETT

02/18/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name REUM, MICHELE  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR  
Name PERDUE, MARSHA  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR  
Name ROBINSON, JANET  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER  
Name OSBORN, DESIREE  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title SECRETARY  
Name PAIT, MELINDA  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR  
Name SMITH, CAROLYN  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR  
Name BENNETT, MICHAEL  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title VP  
Name VOGEL, CANDI  
Address 7601 TIMBERWOOD DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

*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:** MICHELE REUM

CHAIRMAN

02/18/2025

Electronic Signature of Signing Officer/Director Detail

Date