

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736686

Entity Name: OAKRIDGE "N" CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**410 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442**Current Mailing Address:**410 SOUTH MILITARY TRAIL
DEERFIELD BEACH , FL 33442 US**FEI Number:** 59-1901930**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EAST COAST MAINTENANCE AND MANAGEMENT
410 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 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:** JAMES QUINTANO

01/27/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	NUTKEVITCH, NORMA
Address	229 OAKRIDGE N
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VP, DIRECTOR
Name	BRASHEARS, IRA
Address	213 OAKRIDGE N
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	DIRECTOR
Name	BLOSTIN, WALTER
Address	225 OAKRIDGE N
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	TREASURER
Name	CANGEMI, BRUCE
Address	219 OAKRIDGE N
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	SECRETARY
Name	SHERMAN , LIZ
Address	224 OAKRIDGE N
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	DIRECTOR
Name	ESAR , PHIL
Address	232 OAKRIDGE N
City-State-Zip:	DEERFIELD BEACH FL 33442

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: NORMA NUTKEVITCH

PRESIDENT

01/27/2022

Electronic Signature of Signing Officer/Director Detail

Date