

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739804

Entity Name: OAKDALE ONE ASSOCIATION, INC.**Current Principal Place of Business:**CAROLINA MANAGEMENT SERVICES, INC.
3646 23RD AVENUE SOUTH SUITE 109
LAKE WORTH, FL 33461**Current Mailing Address:**CAROLINA MANAGEMENT SERVICES, INC.
3646 23RD AVENUE SOUTH SUITE 109
LAKE WORTH, FL 33461 US**FEI Number:** 59-2543831**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KONYK & LEMME, PLLC
KONYK & LEMME, PLLC
140 INTRACOASTAL POINTE DRIVE SUITE 310
JUPITER, FL 33477 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:** CHELLE KONYK

04/03/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT
Name PRINCE, DON
Address P.O. BOX 740425
City-State-Zip: BOYNTON BEACH FL 33474Title DIRECTOR
Name WHEELER, MELINDA
Address P.O. BOX 740425
City-State-Zip: BOYNTON BEACH FL 33474Title SECRETARY
Name BERNSTEIN, MICHELLE
Address P.O. BOX 740425
City-State-Zip: BOYNTON BEACH FL 33474Title DIRECTOR
Name RUBENSTEIN, ALLAN
Address P.O. BOX 740425
City-State-Zip: BOYNTON BEACH FL 33474Title TREASURER
Name ZINK, ROBERT
Address P.O. BOX 740425
City-State-Zip: BOYNTON BEACH FL 33474

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: DON PRINCE

PRESIDENT

04/03/2019

Electronic Signature of Signing Officer/Director Detail

Date