

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750697

FILED
Jan 08, 2019
Secretary of State
2715432102CC**Entity Name:** OAK VILLAGE OF THE TRAILS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**124 N NOVA ROAD
SUITE 145
ORMOND BEACH, FL 32174**Current Mailing Address:**124 N NOVA ROAD
SUITE 145
ORMOND BEACH, FL 32174 US**FEI Number:** 59-2188331**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NIEVES, RAFAEL
124 N NOVA ROAD
SUITE 145
ORMOND BEACH, FL 32174 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:** RAFAEL NIEVES

01/08/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	MCLEAN, JACK
Address	124 N NOVA ROAD SUITE 145
City-State-Zip:	ORMOND BEACH FL 32174

Title	TREASURER, SECRETARY
Name	MCLEAN, LOURDES
Address	124 N NOVA ROAD SUITE 145
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	LACIVITA, ANTHONY
Address	124 N NOVA ROAD SUITE 145
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	SWINK, JENNIFER
Address	124 N NOVA ROAD SUITE 145
City-State-Zip:	ORMOND BEACH FL 32174

Title	VP
Name	NIEVES, RAY
Address	124 N NOVA ROAD SUITE 145
City-State-Zip:	ORMOND BEACH FL 32174

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: LOURDES MCLEAN**SECRETARY**

01/08/2019

Electronic Signature of Signing Officer/Director Detail

Date