Entity Name: LAUREL OAK HOMEOWNERS ASSOCIATION, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2801 NORTH UNIVERSITY DRIVE STE #204 CORAL SPRINGS, FL 33065

DOCUMENT# 757114

Current Mailing Address:

2801 NORTH UNIVERSITY DRIVE STE #204 CORAL SPRINGS, FL 33065 US

FEI Number: 59-2103533

Name and Address of Current Registered Agent:

LIPPMAN, KAREN 2801 NORTH UNIVERSITY DRIVE STE #204 CORAL SPRINGS, FL 33065 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:

Electronic Signature of Registered Agent

Officer/Director Detail :			
Title	TREASURER	Title	D
Name	KRUMHOLZ, KAREN	Name	FACCANI, ROBERT
Address	15927 LAUREL OAK CIRCLE	Address	15995 LAUREL OAK CIRCLE
City-State-Zip:	DELRAY BEACH FL 33484	City-State-Zip:	DELRAY BEACH FL 33484
Title	VP	Title	PRESIDENT
Name	PRICE, ERIC	Name	MAURO, RICHARD
Address	15944 LAUREL OAK CIRCLE	Address	15888 LAUREL OAK CIRCLE
City-State-Zip:	DELRAY BEACH FL 33484	City-State-Zip:	DELRAY BEACH FL 33484
Title	SECRETARY	Title	DIRECTOR
Name	STRAVITZ, JANET	Name	RODRIGUEZ, GLADYS
Address	15895 LAUREL OAK CIRCLE	Address	5396 LAUREL OAK STREET
City-State-Zip:	DELRAY BEACH FL 33484	City-State-Zip:	DELRAY BEACH FL 33484

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.

PRESIDENT

SIGNATURE: RICHARD MAURO

Electronic Signature of Signing Officer/Director Detail

FILED Apr 08, 2016 Secretary of State CC9578684631

Certificate of Status Desired: No

Date

04/08/2016

Date