### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765167** 

Entity Name: MISSION OAKS OWNERS' ASSOCIATION, INC.

FILED
Mar 01, 2024
Secretary of State
3625521484CC

## **Current Principal Place of Business:**

2002 PORTO BLVD

NEW SMYRNA BEACH, FL 32168

## **Current Mailing Address:**

2002 PORTO BLVD

NEW SMYRNA BEACH. FL 32168 US

FEI Number: 20-3589784 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

REID, BARBARA C 340 N CAUSEWAY

NEW SMYRNA BEACH, FL 32169 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: BARBARA C. REID 03/01/2024

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title PRESIDENT Title VD

NameBUCHANON, JOHNNameCARLTON, JUDIAddress2024 PORTO BLVDAddress1947 MADRE ST

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: NEW SMYRNA BEACH FL 32168

Title S Title T

Name WISE, TERESA Name COLEMAN, DONNIE R
Address 2063 PORTO BLVD Address 2024 PORTO BLVD

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: NEW SMYRNA BEACH FL 32168

Title D Title C

NameCOLLINS, JILLNameDAILEY, ROBERTAddress2071 PORTO BLVDAddress2088 PORTO BLVD

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: NEW SMYRNA BEACH FL 32168

Title D Title C

NameDUCHON, LADDIENameKRIENKE, DAVIDAddress2079 PORTO BLVDAddress1948 MADRE ST

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: NEW SMYRNA BEACH FL 32168

### Continues on page 2

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: TERESA WISE SECRETARY 03/01/2024

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued :

Title D

Name WISE, RICHARD
Address 2063 PORTO BLVD

City-State-Zip: NEW SMYRNA BEACH FL 32168