

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767943

Entity Name: HOMEOWNER'S ASSOCIATION OF SPANISH OAKS, INC.**Current Principal Place of Business:**3150 NE 36TH AVE BOX 572
#3150 NE 36TH AVE
OCALA, FL 34479**Current Mailing Address:**3150 NE 36TH AVE BOX 572
#3150 NE 36TH AVE
OCALA, FL 34479**FEI Number:** 59-2391601**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KING, MARGIE
3150 N.E. 36TH AVE. LOT 247
OCALA, FL 34479 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:** MARGIE KING

01/25/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name DEVANEY, PHYLLIS
Address 3150 NE 36TH AVE, #383
City-State-Zip: Ocala FL 34479

Title VP
Name BENJAMIN, CARL
Address 3150 NE 36 AVE # 267
City-State-Zip: Ocala FL 34479

Title S
Name JONES, JENNIFER
Address 3150 NE 36 AVE # 205
City-State-Zip: Ocala FL 34479

Title T
Name HILL, GERI
Address 3150 NE 36 AVE # 554
City-State-Zip: Ocala FL 34479

Title D1
Name BILSKY, GEORGE
Address 3150 NE 36 AVE #290
City-State-Zip: Ocala FL 34479

Title D2
Name DEVANEY, STEVE
Address 3150 NE 356 AVE #383
City-State-Zip: Ocala FL 34479

Title D3
Name JACOBSON, LUCY
Address 3150 NE 36TH AVE #460
City-State-Zip: Ocala FL 34479

Title D4
Name RUSTON, NANCY
Address 3150 NE 36TH AVE #288
City-State-Zip: Ocala FL 34479

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: NANCY RUSTON

D4

01/25/2015

Electronic Signature of Signing Officer/Director Detail

Date