

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767943

Entity Name: HOMEOWNER'S ASSOCIATION OF SPANISH OAKS, INC.

FILED
Apr 13, 2020
Secretary of State
7143825559CC

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:

JONES, JENNIFER
3150 NE 36TH AVE. LOT 233
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: JENNIFER JONES

04/13/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name JONES, JENNIFER
Address 3150 NE 36TH AVE. LOT 233
City-State-Zip: Ocala FL 34479

Title VP
Name HIGGS, LINDA
Address 3150 NE 36TH AVE #320
City-State-Zip: Ocala FL 34479

Title TREASURER
Name BENJAMIN, DIANA
Address 3150 NE 36TH AVE #267
City-State-Zip: Ocala FL 34479

Title D1
Name GARANT, DAVID
Address 3150 NE 36TH AVE #136
City-State-Zip: Ocala FL 34479

Title D2
Name DAVIS, ROBERT
Address 3150 NE 36TH AVE #574
City-State-Zip: Ocala FL 34479

Title D3
Name DAUM, KEN
Address 3150 NE 36TH AVE #204
City-State-Zip: Ocala FL 34479

Title D4
Name MAXWELL, ROBERTA
Address 3150 NE 36TH AVE #458
City-State-Zip: Ocala FL 34479

Title D5
Name LUKOWSKI, BEVERLY
Address 3150 NE 36TH AVE #266
City-State-Zip: Ocala FL 34479

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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: JENNIFER JONES

REGISTERED AGENT

04/13/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name BENJAMIN, CARL
Address 3150 NE 36TH AVE. LOT 267
City-State-Zip: Ocala FL 34479