

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770843

**Entity Name:** INDIAN OAKS HOMEOWNERS ASSOCIATION OF TALLAHASSEE, INC.

**FILED**  
**Aug 12, 2021**  
**Secretary of State**  
**5890034970CC**

**Current Principal Place of Business:**

1102 N DUVAL ST  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1102 N DUVAL ST  
TALLAHASSEE, FL 32303 US

**FEI Number: 59-2459655**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BURKS, OTHENIA Y  
1102 N DUVAL ST  
TALLAHASSEE, FL 32303 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: OTHENIA Y BURKS**

**08/12/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPT  
Name LUZIETTI, GINO  
Address 2751 WHITMORE CT.  
City-State-Zip: TALLAHASSEE FL 32312

Title DS  
Name KISE, RICK  
Address 2751 WHITMORE CT.  
City-State-Zip: TALLAHASSEE FL 32312

Title DVP  
Name LUZIETTI, JOHN  
Address 2751 WHITMORE CT.  
City-State-Zip: TALLAHASSEE FL 32312

Title MA  
Name BURKS, OTHENIA  
Address 1102 N DUVAL ST  
City-State-Zip: TALLAHASSEE FL 32303

*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: OTHENIA BURKS**

**CAM**

**08/12/2021**

Electronic Signature of Signing Officer/Director Detail

Date