

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N00000000358

**Entity Name:** OAKMONT VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

12765 WEST FOREST HILL BLVD.  
SUITE 1320  
WELLINGTON, FL 33414

**Current Mailing Address:**

PO BOX 212995  
ROYAL PALM BEACH, FL 33421 US

**FEI Number:** 65-1045127

**Certificate of Status Desired:** No

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

KRAVIT LAW, P.A.  
902 CLINT MOORE RD  
STE 136  
BOCA RATON, FL 33487 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name EPSTEIN, KEITH  
Address PO BOX 212995  
City-State-Zip: ROYAL PALM BEACH FL 33421

Title PRESIDENT  
Name CONNOLLY, CATHY  
Address PO BOX 212995  
City-State-Zip: ROYAL PALM BEACH FL 33421

Title SECRETARY  
Name ARCADIA, REYES  
Address PO BOX 212995  
City-State-Zip: ROYAL PALM BEACH FL 33421

Title DIRECTOR  
Name PANSE, STEVE  
Address PO BOX 212995  
City-State-Zip: ROYAL PALM BEACH FL 33421

*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:** CATHY CONNOLLY

**PRESIDENT**

**03/17/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date