

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000358

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

**Current Principal Place of Business:**

12765 FOREST HILL BLVD.  
SUITE 1320  
WELLINGTON, FL 33414

**Current Mailing Address:**

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

**FEI Number:** 65-1045127

**Certificate of Status Desired:** No

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

BACKER ABOUD POLIAKOFF & FOELSTER  
400 S DIXIE HIGHWAY STE 420  
BOCA RATON, FL 33432 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:** KEITH BACKER

03/26/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name EPSTEIN, KEITH  
Address 12765 FOREST HILL BLVD.  
SUITE 1320  
City-State-Zip: WELLINGTON FL 33414

Title PRESIDENT  
Name CONNOLLY, CATHY  
Address 12765 FOREST HILL BLVD.  
SUITE 1320  
City-State-Zip: WELLINGTON FL 33414

Title SECRETARY  
Name PANSE, STEVE  
Address 12765 FOREST HILL BLVD.  
SUITE 1320  
City-State-Zip: WELLINGTON FL 33414

Title TREASURER  
Name BRODER, JAY  
Address 12765 FOREST HILL BLVD.  
SUITE 1320  
City-State-Zip: WELLINGTON FL 33414

Title VP  
Name SOSA, JOEY  
Address 12765 FOREST HILL BLVD.  
SUITE 1320  
City-State-Zip: WELLINGTON FL 33414

*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

03/26/2020

Electronic Signature of Signing Officer/Director Detail

Date