

2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000004831

Entity Name: SEVEN OAKS PROPERTY OWNERS' ASSOCIATION, INC.

FILED
Jun 13, 2022
Secretary of State
2210626306CC

Current Principal Place of Business:

C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 104
ST. PETERSBURG, FL 33702

Current Mailing Address:

C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 104
ST. PETERSBURG, FL 33702 US

FEI Number: 59-3733226

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC.
C/O ASSOCIA GULF COAST
9887 4TH STREET NORTH SUITE 104
ST. PETERSBURG, FL 33702 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: RICHARD BARBA

06/13/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LEMBERG, GARY
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 104
City-State-Zip: ST. PETERSBURG FL 33702

Title TREASURER
Name CHRISTENSEN, JOHN
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 104
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name DIOP, AYAN LFE JEMILLAH
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 104
City-State-Zip: ST. PETERSBURG FL 33702

Title VP
Name MCBRIDE, MARK
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 104
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name BUFFINTON, RICHARD
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 104
City-State-Zip: ST. PETERSBURG FL 33702

Title SECRETARY
Name FINK, RICHARD
Address C/O ASSOCIA GULF COAST
 9887 4TH STREET NORTH SUITE 104
City-State-Zip: ST. PETERSBURG FL 33702

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: LEMBERG , GARY

PRESIDENT

06/13/2022

Electronic Signature of Signing Officer/Director Detail

Date