

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002497

Entity Name: THE OWNERS ASSOCIATION OF VICTORIA LAKES, INC.**Current Principal Place of Business:**4736 BLANDING BLVD.
JACKSONVILLE, FL 32210**Current Mailing Address:**C/O FLORIDA PROPERTY AND ASSN MGMT
POST OFFICE BOX 440367
JACKSONVILLE, FL 32222-0004 US**FEI Number:** 56-2335847**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLORIDA PROPERTY AND ASSOCIATION MANAGEMENT
4736 BLANDING BLVD
JACKSONVILLE, FL 32210 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:** G. TIFFANY WOODALL

04/24/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HUSER, JAMES A
Address 4736 BLANDING BLVD
City-State-Zip: JACKSONVILLE FL 32210

Title VICE PRESIDENT
Name CHUFO, GREGORY R
Address 4736 BLANDING BLVD.
City-State-Zip: JACKSONVILLE FL 32210

Title TREASURER
Name GALAYDICK, STEPHEN E
Address 4736 BLANDING BLVD.
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR
Name DICK, RONALD
Address 4736 BLANDING BLVD.
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR
Name JENKINS, SHERMAN T
Address 4736 BLANDING BLVD.
City-State-Zip: JACKSONVILLE FL 32210

Title SECRETARY
Name SIEFERT, ROBERT J.
Address 4736 BLANDING BLVD.
City-State-Zip: JACKSONVILLE FL 32210

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: JAMES A. HUSER

PRESIDENT

04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date