#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006703

Entity Name: WILD OAKS OF PINELLAS HOMEOWNERS' ASSOCIATION, INC.

FILED Apr 22, 2014 Secretary of State CC5339219618

### **Current Principal Place of Business:**

8191 WILD OAKS CIRCLE LARGO, FL 33773

## **Current Mailing Address:**

PO BOX 66507

ST PETE BEACH, FL 33736 US

FEI Number: 57-1204711 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CARINGAL, CONRAD JPRES 8191 WILD OAKS CIRCLE LARGO, FL 33773 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 PRES Title T

NameCARINGAL, CONRAD JNameKRAMER, REBECCAAddress8191 WILD OAKS CIRCLEAddress8265 WILD OAKS CIRCity-State-Zip:LARGO FL 33773City-State-Zip:LARGO FL 33773

Title VP Title S

NameSTAMEY, ROBERT GNameDINKELMAN, CLOLAAddress8169 WILD OAKS CIRAddress8202 WILD OAKS CIRCity-State-Zip:LARGO FL 33773City-State-Zip:LARGO FL 33773

Title DIRECTOR

Name COIZZA, JOSEPH
Address 8146 WILD OAKS WAY
City-State-Zip: LARGO FL 33773

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: CONRAD CARINGAL

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/22/2014

Date