## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007227

Entity Name: OLDE OAKS HOMEOWNERS ASSOCIATION, INC.

**FILED** Apr 09, 2022 **Secretary of State** 7501622022CC

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

7400 BAYMEADOWS WAY **STE 317** JACKSONVILLE, FL 32256

# **Current Mailing Address:**

7400 BAYMEADOWS WAY **STE 317** JACKSONVILLE, FL 32256 US

FEI Number: 56-2416530 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ASSOCIA - CMC JACKSONVILLE 7400 BAYMEADOWS WAY **STE 317** JACKSONVILLE, FL 32256 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: JAMES GIANCOLA 04/09/2022

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title **TREASURER** Title **PRESIDENT** Name SEMOUCHTCHAK, VICTORIA Name MCCRARY, ALEX

7400 BAYMEADOWS WAY 7400 BAYMEADOWS WAY Address Address **STE 317** 

**STE 317** 

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32256

Title **SECRETARY** Title **TREASURER** Name BENNETT, GREG Name FISHER, TRINA

Address 7400 BAYMEADOWS WAY Address 7400 BAYMEADOWS WAY

> **STE 317 STE 317**

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32256

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.

Electronic Signature of Signing Officer/Director Detail