2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000010587

Entity Name: EAGLE LANDING AT OAKLEAF PLANTATION HOMEOWNERS'

ASSOCIATION, INC.

Current Principal Place of Business:

C/O THE CAM TEAM 2233 PARK AVENUE, SUITE 103 ORANGE PARK, FL 32073

Current Mailing Address:

2233 PARK AVENUE, SUITE 103 ORANGE PARK, FL 32073 US

FEI Number: 59-3793648 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE CAM TEAM, INC. C/O THE CAM TEAM 2233 PARK AVENUE, SUITE 103 ORANGE PARK, FL 32073 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: LINDA K MELTON 04/19/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name HILL, JUNIUS Name JONES, LEE

Address 2233 PARK AVENUE, SUITE 103 Address C/O THE CAM TEAM

City-State-Zip: ORANGE PARK FL 32073

ty-state-zip: ORANGE PARK FL 32073

City-State-Zip: ORANGE PARK FL 32073

Title TREASURER Title SECRETARY

Name POOLE, BOBBY Name LINGLE, KIRK

Address C/O THE CAM TEAM 2233 PARK AVENUE, SUITE 103 Address C/O THE CAM TEAM

City-State-Zip: ORANGE PARK FL 32073

City-State-Zip: ORANGE PARK FL 32073

Title DIRECTOR Title

Name WATSON, SCOTT Name HALL, DONALD

Address C/O THE CAM TEAM
2233 PARK AVENUE, SUITE 103
Address C/O THE CAM TEAM

City-State-Zip: ORANGE PARK FL 32073

City-State-Zip: ORANGE PARK FL 32073

Title DIRECTOR Title DIRECTOR
Name LOUGHEED, PATRICIA

Name YOUNG, MICHAEL
Address C/O THE CAM TEAM

2233 PARK AVENUE, SUITE 103 Address C/O THE CAM TEAM

2233 PARK AVENUE, SUITE 103

City-State-Zip: ORANGE PARK FL 32073

City-State-Zip: ORANGE PARK FL 32073

Continues on page 2

DIRECTOR

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: JUNIUS HILL PRESIDENT 04/19/2022

Electronic Signature of Signing Officer/Director Detail

Date

FILED

Apr 19, 2022

Secretary of State 5161495512CC

Officer/Director Detail Continued:

DIRECTOR Title

Name BROWN, DEBRA

Address

C/O THE CAM TEAM 2233 PARK AVENUE, SUITE 103

City-State-Zip: ORANGE PARK FL 32073