

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010707

Entity Name: OAK HAVEN PROPERTY OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O SOLEIL PROPERTY MANAGEMENT
PO BOX 212964
ROYAL PALM BEACH, FL 33421**Current Mailing Address:**C/O SOLEIL PROPERTY MANAGEMENT
PO BOX 212964
ROYAL PALM BEACH, FL 33421 US**FEI Number:** 37-1691409**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRAVIT, CORY
180 N MILITARY TRAIL
SUITE 120
BOCA RATON, FL 33431 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:** CORY KRAVIT, ESQ

02/13/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	TUCCI, NEIL
Address	C/O SOLEIL PROPERTY MANAGEMENT PO BOX 212964
City-State-Zip:	ROYAL PALM BEACH FL 33421

Title	PROPERTY MANAGER
Name	JIMENEZ, FALICIA
Address	C/O SOLEIL PROPERTY MANAGEMENT PO BOX 212964
City-State-Zip:	ROYAL PALM BEACH FL 33421

Title	VP, SECRETARY, DIRECTOR
Name	BARTOLUCCI, DAVID
Address	C/O SOLEIL PROPERTY MANAGEMENT PO BOX 212964
City-State-Zip:	ROYAL PALM BEACH FL 33421

Title	SEC/TRES
Name	BALLAS, JON
Address	C/O SOLEIL PROPERTY MANAGEMENT PO BOX 212964
City-State-Zip:	ROYAL PALM BEACH FL 33421

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: JIMENEZ , FALICIA

M

02/13/2019

Electronic Signature of Signing Officer/Director Detail

Date