

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11789

Entity Name: COLONIAL OAKS PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2700 UNIVERSITY BLVD. W., #A-2
JACKSONVILLE, FL 32217**Current Mailing Address:**2700 UNIVERSITY BLVD. W., #A-2
JACKSONVILLE, FL 32217**FEI Number:** 59-2647455**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHOFFNER, CHARLES R
2700 UNIVERSITY BLVD. W. STE A-2
JACKSONVILLE, FL 32217 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:** CHARLES R SHOFFNER

03/31/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	SCHMIDT, PENNY
Address	2700 UNIVERSITY BLVD. W., BLDG. C
City-State-Zip:	JACKSONVILLE FL

Title	VP
Name	GLASER, NANCY
Address	2700 UNIVERSITY BLVD. W., BLDG B
City-State-Zip:	JACKSONVILLE FL 32217

Title	STD
Name	SHOFFNER, CHARLES R
Address	2700 UNIVERSITY BLVD. W., STE. A-2
City-State-Zip:	JACKSONVILLE FL 32217

Title	VP
Name	MORRIS, ALLEN
Address	2700 UNIVERSITY BLVD. W., BLDG B
City-State-Zip:	JACKSONVILLE FL 32217

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: CHARLES SHOFFNER**DIRECTOR**

03/31/2022

Electronic Signature of Signing Officer/Director Detail

Date