

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000005661

Entity Name: THE SHOPPES OF ST JOHNS OAKS CONDOMINIUM OWNER'S ASSOCIATION, INC.**FILED**
Mar 09, 2023
Secretary of State
8160224132CC**Current Principal Place of Business:**3545 ST JOHNS BLUFF ROAD SOUTH
#301
JACKSONVILLE, FL 32224**Current Mailing Address:**C/O J & R PROPERTY SERVICES
3545 ST JOHNS BLUFF ROAD SOUTH, # 301
JACKSONVILLE, FL 32224 US**FEI Number: 47-4402140****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**J & R PROPERTY SERVICES, INC
121 ST ANDREWS PLACE DRIVE
ST AUGUSTINE, FL 32092 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: JERRE BREITBART****03/09/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	MOYE, JOE
Address	3545 ST JOHNS BLUFF ROAD SOUTH, #301
City-State-Zip:	JACKSONVILLE FL 32224

Title	PRESIDENT
Name	DICARLO, CATE
Address	3545 ST JOHNS BLUFF ROAD SOUTH, #301
City-State-Zip:	JACKSONVILLE FL 32224

Title	TREASURER
Name	MANCINI, DONNA
Address	3545 ST JOHNS BLUFF ROAD SOUTH, #301
City-State-Zip:	JACKSONVILLE FL 32224

Title	SECRETARY
Name	MOYER, BRETT
Address	3545 ST JOHNS BLUFF ROAD SOUTH, #301
City-State-Zip:	JACKSONVILLE FL 32224

Title	DIRECTOR
Name	YURO, MIKE
Address	3545 ST JOHNS BLUFF ROAD SOUTH, #301
City-State-Zip:	JACKSONVILLE FL 32224

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: CATE DICARLO**PRESIDENT****03/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date