| OCALA, FL 34482 | | | | |
|--|--|-----------------|-----------------------------------|------------|
| Current Mailing Address: | | | | |
| 11664 NW 35TH ST OCALA, FL 34482 US | | | | |
| FEI Number: 81-2977870 | | | Certificate of Status Desired: No | |
| Name and Address of Current Registered Agent: | | | | |
| MACK, MELYNN 11664 NW 35TH ST OCALA, FL 34482 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 | : MELYNN MACK | | | 01/22/2024 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | VP | Title | PRESIDENT | |
| Name | SCHAPPERT, ASHLEY | Name | MACK, MELYNN | |
| Address | 11690 NW 35TH ST | Address | 11664 NW 35TH ST | |
| City-State-Zip: | OCALA FL 34482 | City-State-Zip: | OCALA FL 34482 | |
| Title | TREASURER | Title | SECRETARY | |
| Name | SHAW, STEPHANIE | Name | WILLIAMSON, CECE | |
| Address | 11670 NW 35TH ST | Address | 11676 NW 35TH ST | |
| City-State-Zip: | OCALA FL 34482 | City-State-Zip: | OCALA FL 34482 | |

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: MELYNN MACK

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/22/2024

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000005697

Entity Name: OAK LANE FARMS PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11664 NW 35TH ST

FILED Jan 22, 2024 **Secretary of State** 9292137832CC