

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18466

**Entity Name:** OAK KNOLL II AT PINE ISLAND RIDGE HOMEOWNERS ASSOCIATION, INC.

**FILED  
Mar 09, 2015  
Secretary of State  
CC0583495689**

**Current Principal Place of Business:**

MIAMI MANAGEMENT, INC  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**Current Mailing Address:**

MIAMI MANAGEMENT, INC  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**FEI Number: 65-0039075**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MIAMI MANAGEMENT  
1145 SAWGRASS CORP PKWY  
SUNRISE, FL 33323 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	S/TR
Name	SILVERMAN, PAMELA
Address	1145 SAWGRASS CORP PKWY
City-State-Zip:	SUNRISE FL 33323
Title	PRESIDENT
Name	THIBIDEAU, JOHN
Address	MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY
City-State-Zip:	SUNRISE FL 33323

Title	P/VP
Name	O'CONNOR, BRIAN
Address	1145 SAWGRASS CORPORATE PKWY
City-State-Zip:	SUNRISE FL 33323

*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: JOHN THIBIDEAU**

**PRESIDENT**

**03/09/2015**

Electronic Signature of Signing Officer/Director Detail

Date