

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000012449

Entity Name: RESTORING OAKS, INC *****SEE NOTE 1/7/20*******Current Principal Place of Business:**3280 TAMIAMI TRAIL
UNIT 55A #255
PORT CHARLOTTE, FL 33952**Current Mailing Address:**3280 TAMIAMI TRAIL
UNIT 55A #255
PORT CHARLOTTE, FL 33952 US**FEI Number:** 84-3907258**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NETTESHEIM, THOMAS
905 TROPICAL AVE NW
PORT CHARLOTTE, FL 33948 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:** THOMAS NETTESHEIM

04/04/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title D
Name ABEL, PATRICK
Address 3280 TAMIAMI TRAIL
UNIT 55A #255
City-State-Zip: PORT CHARLOTTE FL 33952Title D
Name NILES-THORNE, ELISA DR.
Address 3280 TAMIAMI TRAIL
UNIT 55A #255
City-State-Zip: PORT CHARLOTTE FL 33952Title EXECUTIVE DIRECTOR
Name NETTESHEIM, THOMAS
Address 905 TROPICAL AVE NW
City-State-Zip: PORT CHARLOTTE FL 33948Title D
Name BAKER-TONER, MARIBETH
Address 3280 TAMIAMI TRAIL
UNIT 55A #255
City-State-Zip: PORT CHARLOTTE FL 33952Title D
Name WANKELMAN, SANDRA
Address 3280 TAMIAMI TRAIL
UNIT 55A #255
City-State-Zip: PORT CHARLOTTE FL 33952

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: NETTESHEIM , THOMAS

RA

04/04/2022

Electronic Signature of Signing Officer/Director Detail

Date