2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000012449

Entity Name: RESTORING OAKS, INC *****SEE NOTE 1/7/20*******

FILED Mar 27, 2025 **Secretary of State** 1405936078CC

Current Principal Place of Business:

3280 36 TAMIAMI TRAIL

#255

PORT CHARLOTTE, FL 33952

Current Mailing Address:

3280 36 TAMIAMI TRAIL

#255

PORT CHARLOTTE, FL 33952 US

FEI Number: 84-3907258 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HICKNER, BILL 3280 36 TAMIAMI TRAIL #255

PORT CHARLOTTE, FL 33952 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: BILL HICKNER 03/27/2025

> Date Electronic Signature of Registered Agent

> > #255

Officer/Director Detail:

#255

Title **BOARD MEMBER** Title **BOARD CHAIR**

Name HILAIRE, KETTELENE Name CHRISTOPHER, AMBER

Address 3280 TAMIAMI TRAIL Address 3280 TAMIAMI TRAIL

#255

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

Title **BOARD MEMBER** Title **BOARD MEMBER** Name BONE, LINDA Name JACKSON, MELISSA

Address 3280 36 TAMIAMI TRAIL Address 3280 36 TAMIAMI TRAIL

> #255 #255

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

Title **SECRETARY** Title **TREASURER** HENRY, LINDA HICKNER, BILL Name Name

Address 3280 36 TAMIAMI TRAIL Address 3280 36 TAMIAMI TRAIL #255 #255

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

Title **BOARD MEMBER** Title **BOARD MEMBER** Name HICKNER, ANNA Name ROWE, LISA

Address 3280 36 TAMIAMI TRAIL Address 3280 36 TAMIAMI TRAIL

#255

PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip:

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.

03/27/2025 SIGNATURE: HICKNER, BILL RA