2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19724

Entity Name: KING OAK VILLAS HOMEOWNERS' ASSOCIATION, INC.

FILED
Jan 05, 2016
Secretary of State
CC5911082696

Current Principal Place of Business:

C/O BLUE WATER COMMUNITY MANAGEMENT 4735 OLD CANOE CREEK ROAD SAINT CLOUD, FL 34769

Current Mailing Address:

C/O BLUE WATER COMMUNITY MANAGEMENT 4735 OLD CANOE CREEK ROAD SAINT CLOUD, FL 34769 US

FEI Number: 59-2894833 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, DONNIE 4735 OLD CANOE CREEK ROAD SAINT CLOUD, FL 34769 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: DONNIE MARTINEZ 01/05/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name MARTIN, STEVE Name FORT, JOHN

Address 4735 OLD CANOE CREEK Address 4735 OLD CANOE CREEK ROAD

City-State-Zip: SAINT CLOUD FL 34769 City-State-Zip: SAINT CLOUD FL 34769

Title TREASURER Title SECRETARY

Name DAVI, KATHLEEN Name KORTLEVER, CINDY

Address 4735 OLD CANOE CREEK ROAD Address 4735 OLD CANOE CREEK ROAD

City-State-Zip: SAINT CLOUD FL 34769 City-State-Zip: SAINT CLOUD FL 34769

Title MEMBER AT LARGE
Name CORBETIS, TERESA

Address 4735 OLD CANOE CREEK ROAD

City-State-Zip: SAINT CLOUD FL 34769

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: STEVE MARTIN PRESIDENT