2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29115

Entity Name: OX BOTTOM MANOR COMMUNITY ASSOCIATION, INC.

FILED
Apr 26, 2023
Secretary of State
9662452213CC

Current Principal Place of Business:

1616 METROPOLITAN CIRCLE

SUITE C

TALLAHASSEE, FL 32308

Current Mailing Address:

POST OFFICE BOX 11143 TALLAHASSEE, FL 32302 US

FEI Number: 59-2948258 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC. 1616 METROPOLITAN CIRCLE SUITE C TALLAHASSEE, FL 32308 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: JOANIE TROTMAN 04/26/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DP Title VF

Name ANDREWS, JEANNETTE Name HICKS, ROBERT

Address POST OFFICE BOX 11143 Address POST OFFICE BOX 11143

City-State-Zip: TALLAHASSEE FL 32302 City-State-Zip: TALLAHASSEE FL 32302

Title DS Title DT

Name RAMIREZ, RENEE Name WHITE, WESLEY

Address POST OFFICE BOX 11143 Address POST OFFICE BOX 11143

City-State-Zip: TALLAHASSEE FL 32302 City-State-Zip: TALLAHASSEE FL 32302

Title D Title MA

Name BARBER, JAY Name FLORIDA ASSOCIATION & PROPERTY

NANAGEMENT, INC.

Address POST OFFICE BOX 11143 Address POST OFFICE BOX 11143

City-State-Zip: TALLAHASSEE FL 32302 City-State-Zip: TALLAHASSEE FL 32302

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.

Electronic Signature of Signing Officer/Director Detail

CA