

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29643

**Entity Name:** OAK FORD GOLF CLUB OWNERS ASSOCIATION, INC.

**FILED**  
**Feb 05, 2020**  
**Secretary of State**  
**6763856049CC**

**Current Principal Place of Business:**

2477 STICKNEY POINT RD  
SUITE 118A  
SARASOTA, FL 34231

**Current Mailing Address:**

2477 STICKNEY POINT RD  
SUITE 118A  
SARASOTA, FL 34231 US

**FEI Number: 65-0188722**

**Certificate of Status Desired: No**

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

ARGUS PROPERTY MANAGEMENT  
2477 STICKNEY POINT RD.  
STE 118A  
SARASOTA, FL 34231 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            PRESIDENT  
Name            DOYLE, MARTIN  
Address        2477 STICKNEY POINT RD #118A  
City-State-Zip: SARASOTA FL 34231

Title            T  
Name            ARMSTRONG, FRANK  
Address        2477 STICKNEY POINT RD #118A  
City-State-Zip: SARASOTA FL 34231

Title            VP  
Name            SMITH, DANNY  
Address        2477 STICKNEY POINT RD, SUITE  
                  118A  
City-State-Zip: SARASOTA FL 34231

Title            SECRETARY  
Name            BLEICHER , MICHELLE  
Address        2477 STICKNEY POINT RD, SUITE  
                  118A  
City-State-Zip: SARASOTA FL 34231

Title            DIRECTOR  
Name            HAMILTON, TIM  
Address        2477 STICKNEY POINT RD, SUITE  
                  118A  
City-State-Zip: SARASOT FL 34231

Title            DIRECTOR  
Name            CROSBY, MICHAEL  
Address        2477 STICKNEY POINT RD, SUITE  
                  118A  
City-State-Zip: SARASOTA FL 34231

Title            DIRECTOR  
Name            ORTON, SUE  
Address        2477 STICKNEY POINT RD, SUITE  
                  118A  
City-State-Zip: SARASOTA FL 34231

*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: MARTIN DOYLE**

**PRESIDENT**

**02/05/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date