### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32238

Entity Name: OAK BEND MOBILE HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 10, 2021
Secretary of State
1550684949CC

## **Current Principal Place of Business:**

OAKBEND MHA, INC. 14822 CATRINA LOOP HUDSON, FL 34667

# **Current Mailing Address:**

OAKBEND MHA, INC. 14822 CATRINA LOOP HUDSON, FL 34667 US

FEI Number: 59-1285198 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

SIMLER, SUSAN 14803 CATRINA LOOP HUDSON, FL 34667 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: SUSAN SIMLER 03/10/2021

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

 Title
 D/TRUSTEE
 Title
 D/TREASURER

 Name
 LAKE, NOREEN
 Name
 BROWN, VIVIAN

 Address
 14817 SWOPES LOOP.
 Address
 14829 SWOPES LOOP

City-State-Zip: HUDSON FL 34667 City-State-Zip: HUDSON FL 34667

Title D/SECRETARY Title D/PRESIDENT
Name SIMLER, SUSAN Name GARY, MYERS

Address 14803 CATRINA LOOP Address 14808 CATRINA LOOP

City-State-Zip: HUDSON FL 34667 City-State-Zip: HUDSON FL 34667

Title D/VICE PRESIDENT
Name DUCA, DENISE

Address 14721 SWOPES LOOP
City-State-Zip: HUDSON FL 34667

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: SUSAN SIMLER D/SE

Electronic Signature of Signing Officer/Director Detail

D/SECRETARY 03/10/2021

Date