

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

DOCUMENT# N32409

**Entity Name:** OAKWOOD VILLAGE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**655 W BARRYMORE DR  
BEVERLY HILLS, FL 34465**Current Mailing Address:**PO BOX 640605  
BEVERLY HILLS, FL 34464-0605 US**FEI Number:** 59-2951636**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANNE HATHORN LEGAL SERVICES, LLC.  
150 2ND AVE. N.  
SUITE 1270  
SAINT PETERSBURG, FL 33701 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:** ANNE HATHORN

02/01/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	DORITY, PAULETTE
Address	PO BOX 640605
City-State-Zip:	BEVERLY HILLS FL 34465

Title	SECRETARY
Name	WILIAMS, MARY ANN
Address	PO BOX 640605
City-State-Zip:	BEVERLY HILLS FL 34465

Title	TREASURER
Name	AMELL, FOSTER
Address	PO BOX 640605
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DIRECTOR
Name	CARR, MICHAEL
Address	PO BOX 640605
City-State-Zip:	BEVERLY HILLS FL 34464-0605

Title	DIRECTOR
Name	RUDNICKI, ROMAN
Address	655 W. BARRYMORE DRIVE
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DIRECTOR
Name	SHINN, GORDON
Address	655 W BARRYMORE DR
City-State-Zip:	BEVERLY HILLS FL 34465

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:** FOSTER AMELL

TREASURER

02/01/2021

Electronic Signature of Signing Officer/Director Detail

Date