

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32702

**Entity Name:** THE OAKS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CRIS KENNEDY  
115 RIVERSEDGE DR  
E PALATKA, FL 32131

**Current Mailing Address:**

C/O CRIS KENNEDY  
115 RIVERSEDGE DR  
E. PALATKA, FL 32131 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

PICKENS, JOE H.  
113 N. 4TH STREET  
PALATKA, FL 32077 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 P  
Name TAYLOR, LARRY  
Address 124 RIVERSEDGE DR  
City-State-Zip: EAST PALATKA FL  
  
Title D  
Name HAYNES, DANA  
Address 113 RIVERS EDGE DR  
City-State-Zip: EAST PALATKA FL 32131

Title STD  
Name DANDO, LEE/ SECRETARY,  
TREASURER  
Address 101 RIVERVIEW TERRACE  
City-State-Zip: EAST PALATKA FL  
  
Title D  
Name KENNEDY, CHRISTOPHER  
Address 115 RIVERS EDGE DR  
City-State-Zip: EAST PALATKA FL 32131

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: LARRY TAYLOR**

**PRESIDENT**

**04/30/2019**

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

\_\_\_\_\_  
Date