

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000303

**Entity Name:** OAKRIDGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2000 MONTCLAIR RD.  
LEESBURG, FL 34748

**FILED**  
**Apr 01, 2013**  
**Secretary of State**  
**CC7264253609**

**Current Mailing Address:**

POST OFFICE BOX 492228  
LEESBURG, FL 34749 US

**FEI Number: 59-3164132**

**Certificate of Status Desired: No**

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

MORRISON, FRED A  
1000 W MAIN ST  
LEESBURG, FL 34748 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, DIRECTOR  
Name            CHILDS, TERESA  
Address        2083 MONTCLAIR ROAD  
City-State-Zip: LEESBURG FL 34748

Title            SECRETARY, DIRECTOR  
Name            COATS, GLORIA  
Address        2006 MONTCLAIR ROAD  
City-State-Zip: LEESBURG FL 34748

Title            DIRECTOR  
Name            SZUCS, LUANN  
Address        2054 MONTCLAIR ROAD  
City-State-Zip: LEESBURG FL 34748

Title            DIRECTOR  
Name            DICKINSON, WANDA  
Address        2066 MONTCLAIR ROAD  
City-State-Zip: LEESBURG FL 34748

Title            VP, TREASURER, DIRECTOR  
Name            MORAN, CHARLES  
Address        2081 MONTCLAIR ROAD  
City-State-Zip: LEESBURG FL 34748

*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: TERESA CHILDS**

**PRESIDENT**

**04/01/2013**

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

\_\_\_\_\_  
Date