

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000321

Entity Name: SAINT HUGH OAKS VILLAGE ASSOCIATION, INC.**Current Principal Place of Business:**3605 SW 37 AVE
MIAMI FL, FL 33133**Current Mailing Address:**12 SE 4TH RD
HOMESTEAD, FL 33030 US**FEI Number:** 65-0576847**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SACHS SAX CAPLAN, P.L.
6111 BROKEN SOUND PARKWAY NW, SUITE 200
BOCA RATON, FL 33487 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:** JOSE BILA

04/28/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GOMEZ, KRISTI
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

Title VICE-PRESIDENT
Name BETTON, LACY
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

Title TREASURER
Name BILA, JOSE
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

Title SECRETARY
Name MARMORSTEIN, FRANNIE
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name LLUCH, JORGE
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name WALL, ANNE
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name KLEIS, JACQUELINE
Address 12 SE 4TH RD
City-State-Zip: HOMESTEAD FL 33030

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: KRISTI GOMEZ

PRESIDENT

04/28/2023

Electronic Signature of Signing Officer/Director Detail

Date