# 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: BOB WILSON

City-State-Zip: NAPLES FL 34104

Electronic Signature of Signing Officer/Director Detail

04/28/2015

2015 FLORIDA NO	T FOR PROFIT CO	<b>RPORATION ANNUAL RE</b>	PORT

## DOCUMENT# N9800006749

#### Entity Name: OXFORD VILLAGE HOMEOWNERS ASSOCIATION, INC.

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

ANCHOR ASSOCIATES INC 3940 RADIO RD, STE 112 NAPLES, FL 34104

## **Current Mailing Address:**

ANCHOR ASSOCIATES INC 3940 RADIO RD, STE 112 NAPLES, FL 34104 US

## FEI Number: 58-2430178

## Name and Address of Current Registered Agent:

ANCHOR ASSOCIATES, INC ANCHOR ASSOCIATES INC 3940 RADIO RD, STE 112 NAPLES, FL 34104 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: BOB WILSON				04/28/2015		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	TREASURER	Title	PRESIDENT			
Name	FUTHEY, DOREEN	Name	WILSON, BOB			
Address	ANCHOR ASSOCIATES INC 3940 RADIO RD, STE 112	Address	ANCHOR ASSOCIATES INC 3940 RADIO RD, STE 112			
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104			
Title	VP, SECRETARY					
Name	WELBY, RENEE					
Address	ANCHOR ASSOCIATES INC 3940 RADIO RD, STE 112					

PRESIDENT

FILED Apr 28, 2015 Secretary of State CC6031259603

Certificate of Status Desired: No

Date