724672

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Grystale/Ziph Hotte #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
2/4/21



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19/30/20--01008--008 **35.00

2021 FEB -4 PH 1: 26
SECRETARY OF STATE
TALL AHASSEE, FL

Office Use Only

2/12/21 On



2021 500 -1 400 7:00

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2020

NICHOLAS A. MUSASHE 1440 HOWELL BRANCH ROAD WINTER PARK, FL 32789

SUBJECT: THE OAKS ASSOCIATION, INC.

Ref. Number: 724672

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 820A00024825

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: The Oaks Association, Inc. Name of Corporation	
DOCUMENT NUMBER: 724672	
The enclosed Statement of Change of Registered Off	Tee/Agent and fee are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Nicholas A. Musashe	
Name of Contact Person	
The Jander Group, Inc.	
Firm/Company	
1440 Howell Branch Road	
Address	
Winter Park, Florida 32789	
City/State and Zip Code	
admin@jandergroup.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	e call:
Nicholas A. Musashe	at (407)628-2500 ext 222
Name of Contact Person	at (407)628-2500 ext 222 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depa	artment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

*STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida n organized under the laws of the State of r registered agent, or both, in the State of	f Florida		
	the corporation: The Oaks Associa	•	r ioriaa.		
	office address: 1440 Howell Branc				
Winter Park, Flo					
3. The mailing a	address (if different):				
		Document number: 724672			
5. The name and Florida Depart	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file wresigned)	vith the		
	Towers Property Management, Inc	·			
	1320 N Semoran Blvd Ste 100	<u> </u>	_		
	Orlando, FL 32807		SECI	2021 5	4 7
6. The name and (if changed):	I street address of the new register	red agent (if changed) and /or registered of	RETARY LLEGA	2021 FEB -4	
	The Jander Group, Inc.		9F	PH	
	1440 Howell Branch Road		STX	J: 2	422
		P.O. Box NOT acceptable	— ं त्मि	6	
	Winter Park, Florida 32789		_		
The street address changed will	ess of its registered office and the be identical.	street address of the business office of i	ts registe	red ag	ent,
Such change wa authorized by th	is authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by an cen notified in writing of the change.	officer s	SO Phyr	
NA	e of an officer or director	Nicholas A. Musashe, President Printed or typed name and to	BOANS !	إحدية	<u>Ke</u> ziosoz Euwal
of my duties, and locument is bei	the appointment as registered ag o comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in writing of this c	ent and agree to act in this capacity, ull statutes relative to the proper and con he obligation of my position as registere e in the registered office address, I herei hange.	nplete pe d agent, by confir	rforma Or, if m thát	ince this the
	JAhumb	10/26/2020			
	nature of Registered Agent	Date			<u> </u>
Nicholas A. Musa	·				
	ped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

* * * FILING FEE: \$35.00 * * *