

N47690

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N47690
 T E S T E S H O M E O W N E R S A S S O C I A T I O N I N
 (proposed corporate name)

00 MAR -6 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N47690
 T E S T E S H O M E O W N E R S A S S O C I A T I O N I N
 (proposed corporate name)

N47690
 T E S T E S H O M E O W N E R S A S S O C I A T I O N I N
 (proposed corporate name)

MICHAEL A. RIZZO
Name
10275 S. W. 27 AVENUE
Address
OCALA, FL 32674
City, State, & Zip
(904) 237-4266
Telephone Number

BSB

003110, 138
~~1162215~~

06/11/87 - JUL 16 - 015
 06/11/87 CHARTER 0122.00
 06/11/87 BENTON --- 0000.00
 06/11/87 HILL --- 0000.00
 06/11/87 LEE --- 0000.00
 06/11/87 WALKER --- 0000.00
 06/11/87 TOTAL --- 0000.00

MAR 4 1992

3793

5874

N47690



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

February 13, 1992

Michael A. Rizzo
10275 S.W. 27th Avenue
Ocala, FL 32674

SUBJECT: OAK CREST ESTATES HOME OWNERS ASSOCIATION, INC.
Reference: W52278

Dear Sir:

We have received your document for the above corporation and your check(s) totaling \$122.50. However, the document has not been filed and is being returned for the following:

The articles of incorporation of a nonprofit corporation must be prepared in compliance with Section 617.0202, Florida Statutes. Enclosed are guidelines for your information.

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

If you have questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker
Corporate Specialist
Business Organization Filing Section

ARTICLES OF INCORPORATION

FILED

FOR

92 MAR -4 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OAK CREST ESTATES HOMEOWNERS ASSOCIATION,

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

OAK CREST ESTATES HOMEOWNERS ASSOCIATION, INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal place of business and the mailing address of this corporation shall be:

10275 S.W. 27 AVENUE, OCALA, FL 32674

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

To collect monthly assessments; pay property taxes, and repairs and maintenance of common grounds.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is as follows:

Method of election provided for in the bylaws.

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and the street address of the initial registered agent is:

MICHAEL A. RIZZO
10275 S.W. 27 AVENUE
OCALA, FL 32674

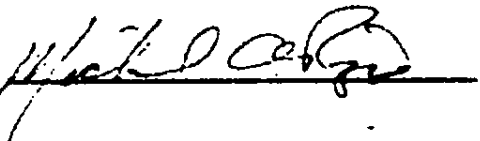
ARTICLE VII INCORPORATORS

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is(are):

MICHAEL A. RIZZO
10275 S.W. 27 AVENUE, OCALA, FL 32674
VICTOR RIZZO
10275 S.W. 27 AVENUE, OCALA, FL 32674
JOAN M. RIZZO
10275 S.W. 27 AVENUE, OCALA, FL 32674

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
7 day of FEBRUARY, 1992.

Signature(s) of the Incorporator(s)



MICHAEL A. RIZZO
Typed name of incorporator signing

Typed name of incorporator signing

Typed name of incorporator signing

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: OAK CREST ESTATES HOMEOWNERS ASSOCIATION, INC.

- 2. The name and address of the registered agent and office is:**

(NAME)

10275 S.W. 27 AVENUE

(P.O. BOX NOT ACCEPTABLE)

OCALA, FL 32674

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE FEBRUARY 7, 1992

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

ANNUAL REPORT
1995



SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N47690 (5)

95 MAY -1 PM 1:07

OAK CREST ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business
10275 SW 27TH AVE
OCALA FL 32674

Mailing Address
P. O. BOX 770206
OCALA FL 34677-0206
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/04/1992	3a. Date of Last Report 07/29/1995
4. FBI Number 59-3104822	5. Certificate of Status Due \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for filing the tax under Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21. City & State 22. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Country
23. City 24. Country	29. City 30. Country

9. Name and Address of Current Registered Agent
RIZZO, MICHAEL A.
10275 SW 27TH AVE
OCALA FL 32674

10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. City 84. State 85. Country
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. NAME RIZZO, MICHAEL A. 10275 SW 27 AVE. OCALA FL	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY-STATE-ZIP	☐ CHG ☐ ADD	
2. NAME RIZZO, JOAN M. 10275 SW 27 AVE. OCALA FL	21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY-STATE-ZIP	☐ CHG ☐ ADD	
3. NAME RIZZO, VICTOR D. 10094 SW 67TH AVE. OCALA FL	31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY-STATE-ZIP	☐ CHG ☐ ADD	
4. NAME	41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY-STATE-ZIP	☐ CHG ☐ ADD	
5. NAME	51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY-STATE-ZIP	☐ CHG ☐ ADD	
6. NAME	61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY-STATE-ZIP	☐ CHG ☐ ADD	

REMITTED BY MAY 1

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SECRETARY OF STATE

4-25-95