### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 743780** 

Entity Name: OAK GROVE VILLAGE ASSOCIATION, INC.

FILED
Apr 23, 2024
Secretary of State
2508889419CC

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

323 CIRCLE DR MAITLAND, FL 32751

# **Current Mailing Address:**

323 CIRCLE DR

MAITLAND, FL 32751 US

FEI Number: 59-1932124 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

VISTA COMMUNITY ASSOCIATION MANAGEMENT 323 CIRCLE DR MAITLAND, FL 32751 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 Title V

Name KULLMAN, CLYDE Name PERUSHEK, KATHLEEN

Address 323 CIRCLE DR Address 323 CIRCLE DR

City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title SECRETARY Title TREASURER

Name SABIN, PATRICIA Name SICKLE, ALVENA VAN

Address 323 CIRCLE DR Address 323 CIRCLE DR

City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title DIRECTOR Title DIRECTOR

NameGREATHOUSE, DALENamePOMEROY, LARRYAddress323 CIRCLE DRAddress323 CIRCLE DR

City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title DIRECTOR

Name BURKE, DAVID

Address 323 CIRCLE DR

City-State-Zip: MAITLAND FL 32751

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: CLYDE KULLMAN PRESIDENT 04/23/2024