

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747240

Entity Name: SPANISH OAKS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1011 WINDING OAKS DR
PALM HARBOR, FL 34683**Current Mailing Address:**PO BOX 1102
PALM HARBOR, FL 34682**FEI Number:** 59-2088271**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COX, DEBI
2046 WINDING OAKS DR
PLAM HARBOR, FL 34683 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:** DEBI COX

02/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	JOHNSON, JERRY
Address	1011 WINDING OAKS DR.
City-State-Zip:	PALM HARBOR FL 34683

Title	SECRETARY
Name	WALSH, SHERI
Address	1903 HIGHVIEW DR
City-State-Zip:	PALM HARBOR FL 34683

Title	VP
Name	HUNERS, NANCY
Address	964 WOODLAND DRIVE
City-State-Zip:	PALM HARBOR FL 34683

Title	TREASURER
Name	COX, DEBI
Address	2046 WINDING OAKS DRIVE
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	THAYER, MISTY
Address	934 WINDING OAKS DR
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	WARD, JUSTIN
Address	953 WINDING OAKS DR
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	BALLARD, JOSHUA
Address	2017 CINDY CIR
City-State-Zip:	PALM HARBOR FL 34683

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: DEBI COX**TREASURER**

02/29/2020

Electronic Signature of Signing Officer/Director Detail

Date