

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747632

Entity Name: OAKRIDGE VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4786 S. ATLANTIC AVE.
4-B
PONCE INLET, FL 32127

Current Mailing Address:

C/O PATRICIA LAVELLE
62 PRINCEWOOD AVE
STATEN ISLAND , NY 10309 US

FEI Number: 59-2182474

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GILBRERTA, WILLIAM D.
4786 S. ATLANTIC AVE
B-2-A-2
PONCE INLET, FL 32127 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
Name GILBREATH, WILLIAM D.
Address 4786 S. ATLANTIC AVE
City-State-Zip: PONCE INLET FL 32127

Title VP
Name KALAYJIAN, LINDA
Address 784 PENNISULA
City-State-Zip: ORMOND BEACH FL 32176

Title STD
Name LAVELLE , PATRICIA
Address 62 PRINCEWOOD AVE
City-State-Zip: STATEN ISLAND NY 10309

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: PATRICIA LAVELLE

TREASURE

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date