#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 756692** 

Entity Name: OAKWOOD VILLAS PROPERTY OWNERS' ASSOCIATION, INC

**FILED** Apr 21, 2017 Secretary of State CC7720822675

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

1430 SHEAFE AVENUE, NE PALM BAY. FL 32905-3739

### **Current Mailing Address:**

1430 SHEAFE AVENUE, NE PALM BAY. FL 32905-3739

FEI Number: 59-2329304 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

ROBERTS, ALBERT 1430 SHEAFE AVENUE, NE PALM BAY, FL 32905-3739 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: ALBERT ROBERTS 04/21/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail :

DIRECTOR

Title

Title	DIRECTOR	Title	DIRECTOR
1100	DITTECTOR	1140	DIIKEOTOK

PATNOAD, LYNDA Name Name SOCHA, EDWARD

1430 SHEAFE AVENUE, NE Address 1430 SHEAFE AVENUE, NE Address PALM BAY FL 32905-3739 PALM BAY FL 32905-3739 City-State-Zip: City-State-Zip:

DIRECTOR Title Title DIRECTOR

Name DICKSON, ROBERT TRAVER, NANCY Name

Address 1430 SHEAFE AVENUE, NE Address 1430 SHEAFE AVENUE, NE PALM BAY FL 32905-3739 City-State-Zip: City-State-Zip: PALM BAY FL 32905-3739

Title DIRECTOR **DIRECTOR** Title

Name QUINTERO, NANCY Name MARAHRENS, PAUL

Address 1430 SHEAFE AVENUE, NE Address 1430 SHEAFE AVENUE, NE City-State-Zip: PALM BAY FL 32905-3739 PALM BAY FL 32905-3739 City-State-Zip:

ROBERTS, ALBERT Name ROUSSEAU, BERTRAND Name

1430 SHEAFE AVENUE, NE Address 1430 SHEAFE AVENUE, NE Address City-State-Zip: PALM BAY FL 32905-3739

City-State-Zip: PALM BAY FL 32905-3739

# Continues on page 2

DIRECTOR

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.

Title

04/21/2017 SIGNATURE: ALBERT ROBERTS DIRECTOR / PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

NameLUTTRELL, JOSEPHAddress1430 SHEAFE AVE, NECity-State-Zip:PALM BAY FL 32905