**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Mar 26, 2021**
**Secretary of State**
**3145567960CC**

DOCUMENT# N01000003459

**Entity Name:** OSCEOLA WOODS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE SUITE 200
PALM BEACH GARDENS , FL 33410

**Current Mailing Address:**

C/O FIRST SERVICE RESIDENTIAL
11621 KEW GARDENS AVE SUITE 200
PALM BEACH GARDENS , FL 33410 US

**FEI Number: 55-0795083**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FIELDS, ESQ, GARY
4400 PGA BLVD
SUITE 308
PALM BEACH GARDENS, FL 33410 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 | TREASURER | Title | SECRETARY |
| Name | BRUNNER, BRYAN | Name | MCLEMORE, CHRISTOPHER |
| Address | C/O FIRST SERVICE RESIDENTIAL<br>11621 KEW GARDENS AVE SUITE 200 | Address | C/O FIRST SERVICE RESIDENTIAL<br>11621 KEW GARDENS AVE SUITE 200 |
| City-State-Zip: | PALM BEACH GARDENS FL 33410 | City-State-Zip: | PALM BEACH GARDENS FL 33410 |
| Title | VP | Title | PRESIDENT |
| Name | DUDEK, JENNIFER | Name | SALATA, EDMUND |
| Address | C/O FIRST SERVICE RESIDENTIAL<br>11621 KEW GARDENS AVE SUITE 200 | Address | C/O FIRST SERVICE RESIDENTIAL<br>11621 KEW GARDENS AVE SUITE 200 |
| City-State-Zip: | PALM BEACH GARDENS FL 33410 | City-State-Zip: | PALM BEACH GARDENS FL 33410 |
| Title | DIRECTOR | | |
| Name | PATYKULA, TIMOTHY | | |
| Address | 11621 KEW GARDENS AVE,<br>SUITE 200 | | |
| City-State-Zip: | PALM BEACH GARDENS FL 33410 | | |

*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: EDMUND SALATA PRESIDENT 03/26/2021

Electronic Signature of Signing Officer/Director Detail — Date