

2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000003459

Entity Name: OSCEOLA WOODS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

C/O SEA BREEZE COMMUNITY MANAGEMENT SERVICES INC.
4227 NORTHLAKE BOULEVARD
PALM BEACH GARDENS , FL 33410

Current Mailing Address:

C/O SEA BREEZE COMMUNITY MANAGEMENT SERVICES INC.
4227 NORTHLAKE BOULEVARD
PALM BEACH GARDENS , FL 33410 US

FEI Number: 55-0795083**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

BACHOVE, ESQ, EVAN
4440 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: EVAN BACHOVE, ESQ**12/13/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BRUNNER, BRYAN
Address C/O SEA BREEZE COMMUNITY
 MANAGEMENT SERVICES INC.
 4227 NORTHLAKE BOULEVARD
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY
Name CHOINSKI, VICKI
Address C/O SEA BREEZE COMMUNITY
 MANAGEMENT SERVICES INC.
 4227 NORTHLAKE BOULEVARD
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP
Name GONZALEZ DUDEK, JENNIFER
Address C/O SEA BREEZE COMMUNITY
 MANAGEMENT SERVICES INC.
 4227 NORTHLAKE BOULEVARD
City-State-Zip: PALM BEACH GARDENS FL 33410

Title PRESIDENT
Name SALATA, EDMUND
Address C/O SEA BREEZE COMMUNITY
 MANAGEMENT SERVICES INC.
 4227 NORTHLAKE BOULEVARD
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name PATYKULA, TIMOTHY
Address C/O SEA BREEZE COMMUNITY
 MANAGEMENT SERVICES INC.
 4227 NORTHLAKE BOULEVARD
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: TIMOTHY PATYKULA**DIRECTOR****12/13/2023**

Electronic Signature of Signing Officer/Director Detail

Date