

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29434

Entity Name: KLOSTERMAN OAKS VILLAGE HOMEOWNERS ASSOCIATION, INC.**FILED**
Feb 24, 2020
Secretary of State
5513587137CC**Current Principal Place of Business:**4772 KLOSTERMAN OAKS BLVD
PALM HARBOR, FL 34683**Current Mailing Address:**4772 KLOSTERMAN OAKS BLVD
PALM HARBOR, FL 34683 US**FEI Number: 59-2939700****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MYER, DALE
4772 KLOSTERMAN OAKS BLVD.
PALM 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: DALE MYER****02/24/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	MYER, DALE
Address	4772 KLOSTERMAN OAKS BLVD
City-State-Zip:	PALM HARBOR FL 34683

Title	PRESIDENT
Name	WEEKES-CHARLES, LEAH
Address	4946 KLOSTERMAN OAKS CT.
City-State-Zip:	PALM HARBOR FL 34683

Title	VP
Name	GORY, JAMES
Address	4840 KLOSTERMAN OAKS BLVD
City-State-Zip:	PALM HARBOR FL 34683

Title	SECRETARY
Name	NOVAK, KIMBERLY
Address	4883 KLOSTERMAN OAKS BLVD
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	JOSEPH, PHILLIPS
Address	4922 KLOSTERMAN OAKS CT.
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: DALE MYER**TREASURER****02/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date