## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33490

Entity Name: SOUTH OAKS HOMEOWNERS' ASSOCIATION OF

MELBOURNE, INC.

**Current Principal Place of Business:** 

C/O LELAND MANAGEMENT 6972 LAKE GLORIA BLVD ORLANDO, FL 32809

**Current Mailing Address:** 

C/O LELAND MANAGEMENT 6972 LAKE GLORIA BLVD ORLANDO, FL 32809 US

FEI Number: 59-2952558 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LELAND MANAGEMENT, INC C/O LELAND MANAGEMENT 6972 LAKE GLORIA BLVD ORLANDO, FL 32809 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: REBECCA FURLOW 04/18/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP

Name MCCURRY, WILMA Name HIPSLEY, STEVE

Address 6972 LAKE GLORIA BLVD Address 6972 LAKE GLORIA BLVD

City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

Title T Title SECRETARY

NameSAMWAYS, JUDYNameSHEEHAN, VIOLETTE GAddress6972 LAKE GLORIA BLVDAddress6972 LAKE GLORIA BLVD

City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

Title D Title D

Name MCCARTHY, SARA Name REMOR, TORI

Address 6972 LAKE GLORIA BLVD Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name SUTLIFF, DAVID

Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

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: WILMA MCCURRY PRESIDENT 04/18/2016

FILED Apr 18, 2016

**Secretary of State** 

CC6789769058