DOCUMENT# N9600002461	Mar 21, 2018 Secretary of State
Entity Name: OAK POINTE OF TIGER POINT HOMEOWNERS ASS INC.	OCIATION, CC9245992416
Current Principal Place of Business:	
7 MADRID AVE	
GULF BREEZE, FL 32561	
Current Mailing Address:	
-	
GULF BREEZE, FL 32561 US	
FEI Number: 59-3397142	Certificate of Status Desired: No
Name and Address of Current Registered Agent:	
KUHN, LARRY	
7 MADRID AVE	

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.

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE	: LARRY KUHN			03/21/2018
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	PRESIDENT	Title	VP	
Name	STEELE, JIM	Name	WALKER, GREG	
Address	18 VIA DELUNA DR	Address	18 VIA DELUNA DR	
City-State-Zip:	PENSACOLA BEACH FL 32561	City-State-Zip:	PENSACOLA BEACH FL 3256	1
Title	TREASURER	Title	DIRECTOR	
Name	HOEFLICH, WENDY C	Name	CONSTANCE, GEORGE	
Address	18 VIA DELUNA DR	Address	18 VIA DELUNA DR	
City-State-Zip:	PENSACOLA BEACH FL 32561	City-State-Zip:	PENSACOLA BEACH FL 3256	1
Title	SECRETARY			
Name	TRACHY, TRISH			
Address	18 VIA DELUNA DR			
City-State-Zip:	PENSACOLA BEACH FL 32561			

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.

VP

SIGNATURE: GREG WALKER

GULF BREEZE, FL 32561 US

Electronic Signature of Signing Officer/Director Detail

FILED