

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003695

**Entity Name:** WINDSOR OAKS MEDICAL PARK PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1818 SW 15TH AVE  
OCALA, FL 34471

**Current Mailing Address:**

P.O. BOX 6587  
OCALA, FL 34478

**FEI Number: 65-0943086**

**Certificate of Status Desired: No**

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

RIVERA, CALEB R  
1818 SW 15TH AVE  
OCALA, FL 34471 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: CALEB RIVERA

02/08/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	OTHER	Title	CEO
Name	RIVERA, CALEB	Name	ADAMS, LISA
Address	P.O. BOX 6587	Address	1818 SW 15TH AVE
City-State-Zip:	OCALA FL 34478	City-State-Zip:	OCALA FL 34471
Title	CFO		
Name	PHIPPS, TRACY		
Address	1818 SW 15TH AVE		
City-State-Zip:	OCALA FL 34471		

*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: LISA ADAMS

CEO

02/08/2024

Electronic Signature of Signing Officer/Director Detail

Date