


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008 8:00 am
Secretary of State

02-22-2008 90018 029 ****70.00

DOCUMENT # 706568
 1. Entity Name
TWIN OAK POND ASSOCIATION INC



Principal Place of Business Mailing Address
5237 WINDING WAY **5237 WINDING WAY**
SARASOTA, FL 34242 US **SARASOTA, FL 34242 US**

DO NOT WRITE IN THIS SPACE

40050000



02022008 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For
05-0062205 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
HENDERSON, CAROL ANN
5237 WINDING WAY
SARASOTA, FL 34242

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$81.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	HENDERSON, CAROL ANN
STREET ADDRESS	5237 WINDING WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	D
NAME	MCCANN, JACK
STREET ADDRESS	5244 WINDING WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	VP
NAME	BECHTEL, DANIEL
STREET ADDRESS	5254 WINDING WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	P
NAME	BENSEMAN, GERALDINE
STREET ADDRESS	5230 WINDING WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	S
NAME	GORDON, BRYAN
STREET ADDRESS	5235 WINDING WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	D
NAME	TOWN, PHYLLIS
STREET ADDRESS	5239 WINDING WAY
CITY-ST-ZIP	SARASOTA, FL 34242

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carol Ann Henderson* **CAROL ANN HENDERSON** *2/12/08* *941-346-7811*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

46030296

706568

Additional Directors:

(These names were submitted last year as well — no changes.)

D

HENDERSON, MARTIN
5237 WINDING WAY
SARASOTA, FL 34242

D

TOWN, BOB
5237 WINDING WAY
SARASOTA, FL 34242

D

WHITE, NANCY
5220 WINDING WAY
SARASOTA, FL 34242

D

RASMUSSEN, STEEN
5225 WINDING WAY
SARASOTA, FL 34242