

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90139 014 ****70.00

DOCUMENT # 724672

1. Entity Name

THE OAKS ASSOCIATION, INC.



Principal Place of Business

1917 WOODCREST DR.
WINTER PARK FL 32792

Mailing Address

1917 WOODCREST DR.
WINTER PARK FL 32792



2. Principal Place of Business

1919 WOODCREST DR

3. Mailing Address

1919 WOODCREST DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

WINTER PK, FL

City & State

WINTER PK, FL

4. FEI Number

59-3212486

Applied For

Not Applicable

Zip

32792

Country

USA

Zip

32792

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRAHAM, NANCY
1917 WOODCREST DR.
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name

DOROTHY A. LESE

Street Address (P.O. Box Number is Not Acceptable)

1919 WOODCREST DR.

City

WINTER PARK

FL

Zip Code

32792

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

DOROTHY A. LESE

Signature, typed or printed name of registered agent and title if applicable

Dorothy A. Lese

(NOTE: Registered Agent signature required when reinstating)

2/15/06

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2006

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TD
GRAHAM, NANCY
1917 WOODCREST DRIVE
WINTER PARK FL 32792

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
RASON, JOAN
1915 WOODCREST DRIVE
WINTER PARK FL 32792

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
SCARBERRY, KEN
1931 WOODCREST DRIVE
WINTER PARK FL 32792

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TD
LESE, DOROTHY A.
1919 WOODCREST DR.
WINTER PK, FL 32792

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
CASON, JOAN E
1915 WOODCREST DR.
WINTER PK, FL 32792

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
BOSS, JANET
1927 WOODCREST DR.
WINTER PK, FL 32792

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Dorothy A. Lese* DOROTHY A. LESE 2/15/06 407628-1406