

FILE NOW: FILING FEE IS \$61.25

Amended

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NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 OCT 30 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 732511
1. Corporation Name
Southern Oaks Association, Inc.

Principal Place of Business Mailing Address
7601 Timberwood Drive
Jacksonville, Florida 32256

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	7601 Timberwood Drive	26	Same	4/21/75	6/27/97
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27			<input checked="" type="checkbox"/> Not Applicable
23. City & State		28. City & State		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.03?	
32256	USA			<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Adam G. Adams, III 1 Independent Drive, Suite 3131 Jacksonville, Florida 32202				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack Pihl	1.2 NAME	000002338030--6
STREET ADDRESS	7604 Covewood Drive	1.3 STREET ADDRESS	-11/04/97--01083--013
CITY-ST-ZIP	Jacksonville, Florida 32256	1.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	CD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Herb Gordon
STREET ADDRESS		2.3 STREET ADDRESS	7619 Timberwood Drive
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Jacksonville, Florida 32256
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Jeanne Hlebak
STREET ADDRESS		3.3 STREET ADDRESS	7621 Plumwood Drive
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Jacksonville, Florida 32256
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	T/D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	Betty Little
STREET ADDRESS		4.3 STREET ADDRESS	7702 Plumwood Drive
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Jacksonville, Florida 32256
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	Gertie Poole
STREET ADDRESS		5.3 STREET ADDRESS	11005 Starwood Drive
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Jacksonville, FL 32256
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	Rebecca Hackett
STREET ADDRESS		6.3 STREET ADDRESS	7606 Plumwood Drive
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Jacksonville, Florida 32256

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Herb Gordon* (904) 292-0960
Herb Gordon, Chairman Southern Oaks Board of Directors

CR2E037 (9/96)

(2)

Continuation of 13.

D
Mildred Schmuhl
11009 Starwood Drive
Jacksonville, Florida 32256

Addition

D
Christine Pihl
7604 Covewood Drive
Jacksonville, Florida 32256

Addition