## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 739497** 

FILED Mar 30, 2007 Secretary of State

Entity Name: THE OAK DOORS, INC., A CONDOMINIUM

Current Principal Place of Business: New Principal Place of Business:

301 87TH AVE. 301 87TH AVENUE

ST PETE BCH, FL 33706 US ST PETE BEACH, FL 33706 US

Current Mailing Address: New Mailing Address:

C/O QUALITY MGMT. SERVICE C/O CONDO MGT PLUS, INC. PO BOX 66245 PO BOX 86507

ST PETE BEACH, FL 33736 MADEIRA BEACH, FL 337386507

FEI Number: 59-2262963 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SCHNOOR, FRANK
C/O QUALITY MGMT SERV.
7217 GULF BLVD. STE 6

ONESSIMO, LISA
301 87TH AVENUE, UNIT 205
ST PETE BEACH, FL 33706 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: LISA ONESSIMO 03/30/2007

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

ST PETE BCH., FL 33706 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DT ( ) Delete Title: P (X) Change( ) Addition

 Name:
 KELL, BRENDA
 Name:
 ONESSIMO, LISA

 Address:
 301 87TH AVE UNIT 103
 Address:
 301 87TH AVE UNIT 205

City-St-Zip: SAINT PETERSBURG BEACH, FL 33706 City-St-Zip: ST PETE BEACH, FL 33706

Title: DS ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 CREPEAU, JEANNE
 Name:
 KELL, BRENDA

 Address:
 301 87TH AVE UNIT 102
 Address:
 301 87TH AVE UNIT 103

Address: 301 87 H AVE UNIT 102 Address: 301 87 H AVE UNIT 103 City-St-Zip: SAINT PETERSBURG BEACH, FL 33706 City-St-Zip: ST PETE BEACH, FL 33706

Title: DP ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 ONESSIMO, LISA
 Name:
 CREPEAU, JEANNE

 Address:
 PO BOX 9606
 Address:
 1878 ELAINE DRIVE

City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: CLEARWATER, FL 337601403

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JEANNE CREPEAU S 03/30/2007