NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 748848

THE OAKS UNIT I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business % THE VANGUARD MANAGEMENT GROUP 8737 TEMPLE TERRACE HWY TEMPLE TERRACE FL 33637

Mailing Address

% THE VANGUARD MANAGEMENT GROUP 8737 TEMPLE TERRACE HWY TEMPLE TERRACE FL 33637

FILED Mar 01, 1999 8:00 am § Secretary of State 03-01-1999 90042 016 ****61.25

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2. Principal Pl	ace of Business	2a. Mailing Address	11	م ر سیست	3. Date Incorporated or Quali	fed		İ			
21			NE	PERR	4/FEI Number	 -	1 1	lied Con			
Suite, Apt.	#, etc. + + + + + + + + + + + + + + + + + + +	Suite, Apt. #, etc.	111	5 70%	59-1993618			Applicable			
22 6 / 2	D EMIG LERRACE	27 (1) VA / UU /	PLL) / <u>[[0</u>]	39 199010		\$8.75 A	*			
City & State City & State 28 EMPLE TEX			RR,	Ace, F	5. Certificate of Status Desire	d 🗆	Fee Rec				
Zip	Country	Zip	Country	, 6	6. Election Campaign Finance	ing 🖂	\$5.00				
24	25	29 3965/30	U	<u>1フ</u>	Trust Fund Contribution		Added to	Fees			
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
			81	Name							
MOYER, BOB				82 Street Address (P.O. Box Number is Not Acceptable)							
% THE VANGUARD MANAGEMENT GROUP				8795 TEMPLE TERRACE HWY,							
	PLE TERRACE HWY		83					1			
	ERRACE FL 33637		84	City			85 Zip C	ode			
			- 1	`		FL					
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 Signature. Si											
12.	OFFICERS AND	` <u> </u>	3.	it bigitation to	ADDITIONS/CHANGES TO	OFFICERS AN	ID DIRECTOR	RS IN 12			
TITLE	PD OFFICERS AND		1 TITLE				☐ Change	☐ Addition			
NAME :	LOCK, DON	7	2 NAME								
Ì	14100 N 46TH ST #104A	1 "		T ADDRESS							
STREET ADDRESS	TAMPA FL 33613		4 CITY-S								
CITY-ST-ZIP	VD		1 TITLE	1-215	05		Change	Addition			
TITLE	WEST, RANDALL	_	2 NAME		PD WEST, RANDALL YYII SHADY TERRA YAMPA, FL 3 S/T/D WARRINGTON, KARR YYII SHADY TERRACE TAMPA, FL 33		7				
NAME		■ *		T ADDRESS	WES LADY TERRA	CE LANE,	#2101				
STREET ADDRESS	14100 N 46TH ST #107A			T 710	441,0000	3613	,				
CITY-ST-ZIP	TAMPA FL 33613 SD		. 4 CITY- S .1 TITLE	11-21	CITIO	 	Change	Addition			
TITLE	TT	/`	2 NAME	1	SIIID KARE	₹N ,	14.7				
NAME	GREY, BILL			TADDRESS	WARRINGTON	I LANE #	/06				
STREET ADDRESS	14100 N 46TH ST #209A			I ADUKESS	TAMPA FL 33	3613					
CITY-ST-ZIP	TAMPA FL 33613		.4. CITY-S .1 TITLE	31-ZIP	 			Addition			
TITLE					MOYER ROBERT 8755 TEMPLE TE	* • •		/~			
NAME		1	2 NAME	T ADDRESS	MOYBELLOUISTE	RINCE	lwy.				
STREET ADORESS		' l '		T ADDRESS	TEMPLE TEXARE,	E/ 33	637				
CITY-ST-ZIP			4 CITY-S	1-212	TEMPLE TERRITOR,	<u> </u>	☐ Change	Addition			
TITLE			2 NAME								
NAME				T ADDRESS							
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CITY-\$T-ZIP			.1 TILE				Change	Addition			
TITLE		Detere	2 NAME]							
NAME				TADDRESS				ļ			
STREET ADORESS		I '									
CITY-ST-ZIP		6.	4 CITY-S	T-ZIP							

I 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 of 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 chapter 1.0 on an attachment with an address, with all other like empowered.

SIGNATURE: