

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91501 036 ****70.00

DOCUMENT # 751181

1. Entity Name

THE OAKS UNIT II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**16105 N FLORIDA
 STE A
 LUTZ FL 33549
 US**

**16105 N FLORIDA
 STE A
 LUTZ FL 33549
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2072303

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIVEY, WILLIAM C.
 16105 N FLORIDA
 STE A
 LUTZ FL 33549**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

~~FILE NOW: FEE IS \$61.25~~

~~9. Election Campaign Financing
 Trust Fund Contribution.~~

~~**\$5:00** May Be
 Added to Fees~~

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **PD** Delete
 NAME: **WEBER, RUSSEL J**
 STREET ADDRESS: **14115 MOSSY GLEN LN 204**
 CITY-ST-ZIP: **TAMPA FL 33613**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **VTD** Delete
 NAME: **CRUF, THOMAS**
 STREET ADDRESS: **14115 MOSSY GLEN LN #202**
 CITY-ST-ZIP: **TAMPA FL 33613**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **SD** Delete
 NAME: **MITCHELL, TERRY L**
 STREET ADDRESS: **14113 MOSSY GLEN LANE #203**
 CITY-ST-ZIP: **TAMPA FL 33613**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
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 CITY-ST-ZIP: Change Addition

12. 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 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: *J.R. Weber* **J.R. WEBER** PRES. OAKS II 4-12-02 631-1392
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

001/481

CR2E037 (9/01)



DO NOT WRITE IN THIS SPACE

Attachment
Box # 75118 / 842565

RUN DATE: 3/26/02
RUN TIME: 9:49 AM

OAKS II CONDOMINIUM ASSN.
BOARD/COMMITTEE MEMBERS REPORT AS OF 03/26/02

NAME/ADDRESS TITLE TERM EXPIRATION

CLASS: PRESIDENT

RUSSEL WEBER President February 2003
14115 Mossy Glen Ln #204 WORK PHONE:
Tampa FL 33613 HOME PHONE: 813-631-1392

CLASS: TREASURER/VICE PRESIDENT

THOMAS C RUF Treasurer/Vice President February 2003
14115 Mossy Glen Ln #202 WORK PHONE:
Tampa FL 33613 HOME PHONE: 813-910-0760

CLASS: SECRETARY

TERRY L. MITCHELL Secretary February 2003
14113 Mossy Glen Lane #203 WORK PHONE:
Tampa FL 33613 HOME PHONE: 813-975-0604

-- End of report --