2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753822

FILED Mar 19, 2009 Secretary of State

Entity Name: OAKWOOD LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: ASSOCIATED PROPERTY MGMT. 1928 LAKE WORTH RD. LAKE WORTH, FL 33461 **New Mailing Address: Current Mailing Address:** ASSOCIATED PROPERTY MGMT. 1928 LAKE WORTH RD. LAKE WORTH, FL 33461 FEI Number: 59-2187144 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: DICKER, EDWARD ESQ 1818 AUSTRALIAN AVENUE SOUTH SUITE 400 WEST PALM BEACH, FL 33409 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete DRAKE, WILLIAM (DON) WENDEL, KARL P Name: Name: 330 COLOMBIA DRIVE Address: 3558 SILVERLACE LANE #29 Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: BOYNTON BEACH, FL 33436 Title: VD () Delete Title: (X) Change () Addition MANDER, ANNETTE Name: DRAKE, DON V Name: Address: 3534 SILVERLACE LANE 44 Address: 3678 SILVERLACE LANE #23 City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: (X) Change () Addition GOLDEN, LYNDA BASEL, LAURI A S Name: Name: 3561 SILVERLACE LN #62 3630 SILVERLACE LN #26 Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: (X) Change () Addition MASCOLA, LAWRENCE Name: Name: MARTINCAVAGE, JANICE T 3639 SILVERLACE LN #83 3613 SILVERLACE LN #66 Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: () Change (X) Addition MASCOLA, LAWRENCE D Name: Name: 3639 SILVERLACE LANE #83 Address: Address: City-St-Zip: City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify 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: JOHN MATH, APM AGT 03/19/2009