

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755379

FILED
Mar 24, 2004
Secretary of State**Entity Name:** OAK HARBOUR ASSOCIATION, INC.**Current Principal Place of Business:**2180 W SR 434 #5000
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**2180 W SR 434 #5000
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 59-2058222**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JAMES INE W JR.
SENTRY MANGEMENT, INC.
2180 WEST SR 434, STE. 5000
LONGWOOD, FL 327795044 US**Name and Address of New Registered Agent:**HART, JAMES W JR.
SENTRY MANGEMENT, INC.
2180 WEST SR 434, STE. 5000
LONGWOOD, FL 327795044 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: JAMES W HART JR

03/24/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: DOWLING, CHARLES
Address: 455 OAK HAVEN DR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: MCCOMAS FITZGERALD, DANA
Address: 450 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPR, FL 32701

Title: TD () Delete
Name: KOETZ, ED
Address: 467 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: WHITE, NANACY
Address: 452 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: SD () Delete
Name: HARTNETT, BONNIE
Address: 423 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PD () Delete
Name: SELLS, JO ANN
Address: 529 OAK HAVEN DR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SELLS, JOANN
Address: 529 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VPD (X) Change () Addition
Name: DOWLING, CHARLES
Address: 455 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPR, FL 32701

Title: SD (X) Change () Addition
Name: HARNETT, BONNIE
Address: 423 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: TD (X) Change () Addition
Name: KOETZ, ED
Address: 467 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D (X) Change () Addition
Name: POTAMI, CARIL
Address: 507 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D (X) Change () Addition
Name: MCCOMAS, DANA
Address: 450 OAK HAVEN DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOANN SELLS

PD

03/24/2004

Electronic Signature of Signing Officer or Director

Date