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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	*****		OF CORPORATIONS	İ	
DOCU 1. Corporat	JMENT #	759115	5 (9)			
OAK 1	VILLAS ASSOC	IATION, INC.				
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Principal Pla	ice of Business		Mailing Address			
C/O GORLE			C/O GORLEY, LOIS			
	H AVE. B-10 CH FL 32960		1057 6TH AVE B-10 VERO BEACH FL 329	aca		
US			US	~	3. Date Incorporated or Qualified	3a. Date of Last Report
	Place of Business		2a. Mailing Address <		07/13/1981 4. FEI Number	04/12/1995
Suite, Ap	Ren Robb) 		20th Avenue	≥ 59-2522635	Applied For Not Applicable
	= 20th A	venue	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	ete		City & State		6. Election Campaign Financing	Fee Required
Zip	o Beach	FL :	28 Vero Be		Trust Fund Contribution	\$5.00 May Be Added to Fees
ब्र ें 329		USA	_{Zφ} 32960	Country 30 USA	8. This corporation has liability for	intangible tax under s. 199.032,
	9. Name and A	ddress of Current	Registered Agent	USA	Florida Statutes 10. Name and Address of New R	Yes XNo
000 =	V 100 111			81 Name	Cynthia L. Cox	O AM LIBRAIL
1057 61	Y, LOIS W			82 Street A	Addigess (P.Q. Box Number is Not Acceptab	le)
BLDG, E				83	1432 + 21st Stree	t. Suite A
	CH FL 32960			84 City		
						OF Zin Code
				1 7 37	ero Beach	FL 85 Zp Code 32960
11. Pursuant or registe	to the provisions of sered agent, or both	Sections 617.0502 a the State of Florida	ind 617.1508, Florida Statu Such change was autnor	ites, the above named cor		FL 32960
11. Pursuant or registe familiar w	to the provisions of sered agent, or both	Sections 617.0502 a the State of Florida bligations of, Section	ind 617.1508, Florida Statu Such change was author n 617.0503, Florida Statute	ites, the above named cor	ero Beach poration submits this statement for the purpoper of directors. I hereby accept the apportunity of directors and of directors.	FL 32960
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oam; that I am an officer of director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed or on an attachment with an address. WATURE AND THEO OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR PROSECULARLY

SIGNATURE: