## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#759433** 

FILED Jun 01, 2007 Secretary of State

Entity Name: OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1111 FOREST NELSON BLVD PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

1111 FOREST NELSON BLVD PORT CHARLOTTE, FL 33952

FEI Number: 59-2464271 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BECKER & POLIAKOFF, P.A. C/O LISA A. WOLIN 630 S. ORANGE AVENUE SARASOTA, FL 34236 US MARR, JULIE M CAM 1111 FOREST NELSON BLVD PORT CHARLOTTE, FL 33952 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: JULIE M. MARR, CAM 06/01/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: GULLIKSON, RALPH Name: GRIMES, ARTHUR

Address: 584 ROSE APPLE Address: 1236 CORKTREE CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: BURGESS, RICK

Address: 1236 E CORKTREE Address: 1172 E CORKTREE CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33954 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DS () Delete Title: TR (X) Change () Addition
Name: MARSTELL, JEAN Name: HALLENBECK, RANDY

Address: 20272 TAPPAN ZEE Address: 472 WINWOOD COURT
City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: ( ) Delete Title: SEC ( ) Change (X) Addition

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: ARTHUR GRIMES PD 06/01/2007