

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765167

FILED
Feb 23, 2011
Secretary of State

Entity Name: MISSION OAKS OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2063 PORTO BLVD
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

2040 PORTO BLVD
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

PO BOX 1124
NEW SMYRNA BEACH, FL 32170

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SCHMIDT, MIKE
2063 PORTO BLVD.
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

SCHMIDT, MIKE
2040 PORTO BLVD
NEW SMYRNA BEACH, FL 32168 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: _____

Electronic Signature of Registered Agent

02/23/2011

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SCHMIDT, MIKE
Address: 2063 PORTO BLVD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP
Name: WIND, BOB
Address: 1895 MADRE ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T
Name: CARLTON, JUDITH
Address: 1947 MADRE ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S
Name: WIND, MARY B
Address: 1895 MADRE ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby 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 all other like empowered.

SIGNATURE: MIKE SCHMIDT

Electronic Signature of Signing Officer or Director

PRES

02/23/2011

Date