

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766203

FILED
Feb 28, 2011
Secretary of State

Entity Name: OAK RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6332 CHISWICK CT.
NEW PORT RICHEY, FL 34655 US

New Principal Place of Business:

Current Mailing Address:

6332 CHISWICK CT.
NEW PORT RICHEY, FL 34655 US

New Mailing Address:

FEI Number: 59-2254976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSIN, JULIE A
6332 CHISWICK COURT
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

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:

Title: P
Name: ROSIN, DAVID
Address: 6332 CHISWICK CT
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: VP
Name: BRESCIA, MIKE
Address: 6315 ARBOR DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: T
Name: ROSIN, JULIE
Address: 6332 CHISWICK COURT
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: D
Name: LINES, DOUGLAS A
Address: 6505 CORONET DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: D
Name: WATKINS, JOE
Address: 2116 PEPPERELL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: D
Name: MCCORMICK, JOHN
Address: 6413 GOVERNORS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

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: JULIE ROSIN

T

02/28/2011

Electronic Signature of Signing Officer or Director

Date