## 2002 UNIFORM BUSINESS REPORT (UBR) **FILED** May 15, 2002 8:00 am Secretary of State **DOCUMENT # 766950** 1. Entity Name THE OAKS UNIT V CONDOMINIUM ASSOCIATION, INC. 05-15-2002 90033 023 \*\*\*\*70.00 Mailing Address 14100 N. 46TH STREET 16105 N FLORIDA 191010 **TAMPA FL 33613** SUITE A **LUTZ FL 33549** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3035562 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name right of Street Address (P.O. Box Number is Not Acceptable) SPIVEY, WILLIAM C 16105 N FLORIDA SUITE A Zip Code **LUTZ FL 33549** 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE SD TITLE (9/01) ☐ Delete Change ☐ Addition NAME SWIDLER, CODY NAME STREET ADDRESS 14100 N. 46TH STREET #R-32 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **TAMPA FL 33613** ☐ Delete TITLE ☐ Change ☐ Addition MUNSCH, MARIE NAME NAME STREET ADDRESS 14205 SHADOW MOSS # 201 STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33613** CITY-ST-ZIP PDSD TITLE ☐ Delete TITLE Change ☐ Addition VAZQUEZ, IVAN NAME STREET ADDRESS 14205 SHADOW MOSS # 102 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33613 TITLE Delete TITLE ☐ Change ☐ Addition NAME KROLL, BRANDON, NAME STREET ADDRESS 14201 SHADOW MOSS # 102 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33613 TITLE Delete TITLE ☐ Change ☐ Addition PHILLIPS, JENNIFER NAME STREET ADDRESS 14207 SHADOW MOSS # 201 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33613 CITY-ST-ZIP TITLE ☐ Delete ( Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 laccy rate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/02

Daytime Phone #

î . . . . RUN DATE: 3/26/02 RUN TIME: 9:50 AM OAKS V CONDOMINIUM ASSN.

Attachment Document#766750

BOARD/COMMITTEE MEMBERS REPORT AS OF 03/26/02

PAGE

TITLE

CLASS: PRESIDENT

IVAN VAZQUEZ

President

February 2003

9 14205 Shadow Moss Lane #102

Tampa FL 33613

WORK PHONE: 813-882-4500 HOME PHONE: 813-245-9583

- CLASS:-TREASURER---

MARIE MUNSCH

Treasurer

February 2003

14205 Shadow Moss Ln #201

WORK PHONE: 813-354-9111

Tampa FL 33613

HOME PHONE:

CLASS: SECRETARY

CODY SWIDLER

Secretary

February 2003

a, 14201 Shadow Moss Ln #202

WORK PHONE: 813-974-9505

Tampa FL 33613

HOME PHONE: 813-631-0728

CLASS: DIRECTOR

BRANDON KROLL

\_\_\_\_Director\_\_\_\_\_\_February 2003----

14201 Shadow Moss Ln #102

WORK PHONE: 813-615-0460 HOME PHONE:

Tampa FL 33613 '

JENNIFER PHILLIPS

February 2003

14207 Shadow Moss Ln #201

Director
WORK PHONE: 813-978-9792

HOME PHONE:

Tampa FL 33613

-- End of report --