## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 770129**

1. Entity Name

## OAK FORREST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1515 FORREST NELSON BLVD PORT CHARLOTTE FL 33952  2. Principal Place of Business		1515 FORREST NEI PORT CHARLOTTE							
		3. Mailing Address	S						
Suite, Apt. #,	etc.	Suite, Apt. #, e	etc.	DO NOT WRITE IN THIS SPAC					
City & State		City & State		4. FEI Number 59-2345677					
Zip	Country	Zip	Country	5. Certificate of Status Desired Fee F					
<b></b>	6. Name and Address of Cur	rent Registered Agent		7. Name and Address of New Registered Agent					
	OLIAKOFF , P.A. GE AVE, 3RD FL	,	Name HANK Street Ad 182	IN, PERSSON, DAVIS, MCCLENA dress (P.O. Box Number is Not Acceptable) O Ringling Blvd.					

FILED Sep 11, 2002 8:00 am Secretary of State

09-11-2002 90066 040 \*\*\*\*61.25



Name				
	DEDCCON	D 7777 C		
17171/11/11/4	FERSSUN,	DAVIS	MCCLENATHEN,	<u>DARME</u>
Street Address (	P.O. Box Number is	Not Acceptable	e)	>
1000 5	,	-	~/	

Ling Blyd

Zip Code

Applied For

\$8.75 Additional

Fee Required

Not Applicable

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. I am familiar with, and accept the obligations of registered agen

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PO BOX 49675

SARASOTA FL 34230

After September 13, 2002.

9. Election Campaign Financing

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Make Check Dayable to

min. will be \$236.25.		Trust Fund Contribution.		Added to Fees Spentment of State				
10. OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BLOOM, KENNETH 1515 FORREST NELSON BLVD, E-206 PORT CHARLOTTE FL 33952 DAST MARY CRONIN 1515 FORREST NELSON BLVD #P-101	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRIGHT, RUSS F-201 1515 F Port Charlot Sec'y OBEREMPT, Ele M 201 1515 F	SELL Correst Nels te, FL 3395	□ Change SCN Blv 52 □ Change	Addition  Addition	CB2E037 (4/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PORT CHARLOTTE FL 33952  DP  IZZO, CARMINE  1515 FORREST NELSON BLVD., K-104  PT CHARLOTTE FL 33952  DT	Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR.  BEMMELL DON Port Charlot	ALD Orrest Nels te, FL 3395	52 ☐ Change SOn 31v 52	Addition d.	
NAME STREET ADDRESS CITY-ST-ZIP	SMITH, CLIFFORD 1515 FORREST NELSON BLVD K-101 PT CHARLOTTE FL 33952	□ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	DIR MAINUSCH, HOI O-102 1515 I Port Charlot	rorrest Nel		Addition vd.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR SZIGETI, ENDRE 1515 FORREST NELSON BLVD K-208 PT CHARLOTTE FL 33952	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CRONIN, JEFFREY 1515 FORREST NELSON BLVD, G-105 PORT CHARLOTTE FL 33952	Pelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	eretti santini i <b>nydiv</b> e		Change	☐ Addition	!

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 accurate 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.

a16/02