

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 771298

1. Entity Name

THE OAKS UNIT VI CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

16105 N. FLORIDA
SUITE A
LUTZ FL 33549
US

16105 N. FLORIDA
SUITE A
LUTZ FL 33549
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2388430

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIVEY, WILLIAM C
16105 N. FLORIDA
SUITE A
LUTZ FL 33549

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PHILLIPS, PATRICIA 14313 HANGING MOSS CIR #201 TAMPA FL 33613 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUTH ROGAN 14319 HANGING MOSS CIR #101 TAMPA FL 33613 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PHILLIPS, GEORGE 14313 HANGING MOSS CIR #202 TAMPA FL 33613 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAY, BRENDA 14319 HANGING MOSS CIR #202 TAMPA FL 33613 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 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.

SIGNATURE:

BRENDA S. RAY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02
Date

Daytime Phone #

CR2E037 (9/01)

FILED
May 28, 2002 8:00 am
Secretary of State

05-01-2002 91497 050 ****70.00

RUN DATE: 3/26/02
RUN TIME: 9:50 AM

Attachment 3039a
Arc. # 771298
OAKS VI CONDOMINIUM ASSN.
BOARD/COMMITTEE MEMBERS REPORT AS OF 03/26/02

PAGE 1

NAME/ADDRESS

TITLE

TERM EXPIRATION

CLASS: PRESIDENT

BRENDA RAY
14319 Hanging Moss Cir #202
Tampa FL 33613

President
WORK PHONE: 813-354-4263
HOME PHONE: 813-903-9432

February 2003

CLASS: TREASURER

MS. RUTH ROGAN
14319 Hanging Moss Cir #102
Tampa FL 33613

Treasurer
WORK PHONE:
HOME PHONE: 813-

February 2003

CLASS: SECRETARY

WISE PROPERTY MANAGEMENT, INC.

Secretary
WORK PHONE:
HOME PHONE:

-- End of report --