2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N04000006546

Entity Name: OAKBROOK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4209 BAYMEADOWS RD SUITE 4
JACKSONVILLE, FL 32217

New Principal Place of Business:

6101 GAZEBO PARK PL
SUITE 103
JACKSONVILLE, FL 32257

Current Mailing Address:

4209 BAYMEADOWS RD SUITE 4
JACKSONVILLE, FL 32217

New Mailing Address:

6101 GAZEBO PARK PL
SUITE 103
JACKSONVILLE, FL 32257

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

Name and Address of Current Registered Agent:

SHEFFIELD, J. HOWARD
4209 BAYMEADOWS RD SUITE 4
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

SHEFFIELD, J. HOWARD
6101 GAZEBO PARK PL
SUITE 103
JACKSONVILLE, FL 32257 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: J. HOWARD SHEFFIELD 04/29/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHEFFIELD, J. HOWARD
Address: 4209 BAYMEADOWS RD SUITE 4
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete
Name: SHACTER, DAVID A
Address: 4209 BAYMEADOWS RD SUITE 4
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete
Name: ROPER, SABRINA
Address: 4209 BAYMEADOWS RD SUITE 4
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SABRINA L ROPER D 04/29/2005
Electronic Signature of Signing Officer or Director Date