

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 03, 2007  
Secretary of State**

DOCUMENT# N06000006749

Entity Name: OAKWATER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2301 LUCIEN WAY, SUITE 400  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

2301 LUCIEN WAY, SUITE 400  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 56-2566430      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KNIGHT, PATRICK J  
2301 LUCIEN WAY, SUITE 400  
MAITLAND, FL 32751      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: DP      ( ) Delete  
Name: BONTRAGER, THOMAS K  
Address: 2301 LUCIEN WAY, SUITE 400  
City-St-Zip: MAITLAND, FL 32751

Title: DV      ( ) Delete  
Name: SHEELER, LAWRENCE M  
Address: 2301 LUCIEN WAY, SUITE 400  
City-St-Zip: MAITLAND, FL 32751

Title: DST      ( ) Delete  
Name: RIGGS, DEBRA  
Address: 2301 LUCIEN WAY, SUITE 400  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: DST      (X) Change ( ) Addition  
Name: CHOMA, DEBRA  
Address: 2301 LUCIEN WAY, SUITE 400  
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: THOMAS K. BONTRAGER

DP

01/03/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date