

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06947

FILED
Apr 10, 2005
Secretary of State

Entity Name: OAK KNOLL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12745 N. 57TH ST,
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

209 CHAPMAN RD. W
LUTZ, FL 33548

New Mailing Address:

12745 N 57TH ST
TAMPA, FL 33617

FEI Number: 59-2894272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENENDEZ, JORGE
12733 N. 57TH ST,
TAMPA, FL 33617 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: PD () Delete
Name: LOPEZ, MILDRED
Address: 12760 N. 57TH ST.
City-St-Zip: TAMPA, FL 33617

Title: TD () Delete
Name: BOYD, BEA,
Address: 209 CHAPMAN RD. W
City-St-Zip: LUTZ, FL 33548

Title: VPD () Delete
Name: MENENDEZ, JORGE
Address: 12733 N. 57TH ST.
City-St-Zip: TAMPA, FL 33617

Title: SD () Delete
Name: WILLIAMS, PAT
Address: 12732 N. 57TH ST.
City-St-Zip: TAMPA, FL 33617

Title: D (X) Delete
Name: MENENDEZ, ZAIDA
Address: 12774 N 57TH ST.
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENENDEZ, JORGE
Address: 12733 N. 57TH ST.
City-St-Zip: TAMPA, FL 33617

Title: TD (X) Change () Addition
Name: MENENDEZ, ZAIDA
Address: 12774 N 57TH ST
City-St-Zip: TAMPA, FL 33617

Title: VPD (X) Change () Addition
Name: WILLIAMS, PATRICIA
Address: 12732 N. 57TH ST.
City-St-Zip: TAMPA, FL 33617

Title: SD (X) Change () Addition
Name: LOPEZ, MILDRED
Address: 12760 N. 57TH ST.
City-St-Zip: TAMPA, FL 33617

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: ZAIDA MENENDEZ

TD

04/10/2005

Electronic Signature of Signing Officer or Director

Date