

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90514 046 *****61.25

DOCUMENT # N07575

1. Entity Name

GARDEN OAKS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**1950 BLUEWATER BLVD.
NICEVILLE FL 32578
US**

Mailing Address

**1950 BLUEWATER BLVD.
NICEVILLE FL 32578
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

P.O. Box 371

VALPARAISO, FL

32580

US



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2792508**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BROOKS, LORRETTA
55 BAY DR., #1102
NICEVILLE FL 32578**

7. Name and Address of New Registered Agent

Name

Jim Burrichter

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

55 BAY DR #4201

City

NICEVILLE

FL

Zip Code

32578

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 agent.

SIGNATURE

[Signature]

Jim Burrichter

1/15/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VP** ☐ Delete
NAME **ANKER, MIKE**
STREET ADDRESS **1729 WARREN WAY**
CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE **D** ☒ Delete
NAME **DAHL, DAVE**
STREET ADDRESS **55 BAY DR #4202**
CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE **PD** ☐ Delete
NAME **BROOKS, LORETTA**
STREET ADDRESS **55 BAY DR #1102**
CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE **S** ☐ Delete
NAME **FURBER, JANET**
STREET ADDRESS **55 BAY DR # 3204**
CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE **T** ☐ Delete
NAME **SARNOSKY, RICH**
STREET ADDRESS **55 BAY DR # 5202**
CITY-ST-ZIP **NICEVILLE FL 32578**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **BURRICHTER, Jim**
STREET ADDRESS **55 Bay DR #4201**
CITY-ST-ZIP **Niceville, FL 32578**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *[Signature]* **MIKE ANKER** **1/15/03** **(850)897-7417**

CR2E037 (10/02)