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Mar 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham, Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N07886 (7)
1. Corporation Name
OVEROAKS PHASE I OWNERS ASSOCIATION, INC.



Principal Place of Business: 4100 ENCHANTED OAKS CIRCLE, KISSIMMEE FL 34741
Mailing Address: 4100 ENCHANTED OAKS CIRCLE, KISSIMMEE FL 34741

3. Date Incorporated or Qualified: 02/28/1985
4. FEI Number: 59-2509156
Applied For: Not Applicable

2. Principal Place of Business: 21 Suite, Apt. #, etc.
22 City & State: 23 DALLAS, TX
24 Zip: 25 75043
2a. Mailing Address: 26 10610 METRIC DRIVE
27 Suite, Apt. #, etc.: 27 SUITE 190
28 City & State: 28 DALLAS, TX
29 Zip: 30 75043

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
KIDD, ANDREW E.
4100 ENCHANTED OAKS CIRCLE
KISSIMMEE FL 34741

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: PD	NOBLE, R. EDWARD 4100 ENCHANTED OAKS CIRCLE KISSIMMEE FL 34741	1.1 TITLE: [] Change [] Addition
TITLE: VTD	KIDD, ANDREW E 4100 ENCHANTED OAKS CIRCLE KISSIMMEE FL 34741	2.1 TITLE: [] Change [] Addition
TITLE: SD	PALMISCIANO, CARL 120 FAIRWAY WOODS BLVD. ORLANDO FL	3.1 TITLE: SD [] Change [X] Addition
TITLE: D	LICAUSI, MARIO 1739 BIG OAK LANE KISSIMMEE FL	4.1 TITLE: D [] Change [X] Addition
TITLE: [] DELETE		5.1 TITLE: [] Change [] Addition
TITLE: [] DELETE		6.1 TITLE: [] Change [] Addition

1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
3.2 NAME: Morrisey, Bill	3.3 STREET ADDRESS: 120 Fairway Woods Blvd.	3.4 CITY-ST-ZIP: Orlando, FL 32824
4.2 NAME: Hawley, Tim	4.3 STREET ADDRESS: 1714 Golfview Drive	4.4 CITY-ST-ZIP: Kissimmee FL 34746
5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____

CR2E037 (10/97)