

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 10, 2002 8:00 am
Secretary of State

05-10-2002 90029 013 ****61.25

DOCUMENT # N15629

1. Entity Name

SOUTHERN OAKS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1354 ELDRON BLVD SE
PALM BAY FL 32909
US

1354 ELDRON BLVD SE
PALM BAY FL 32909
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2768097

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAROTHERS, DONALD
1354 SE ELDRON BLVD
PALM BAY FL 32909

Name

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

City

FL

Zip Code

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.

SIGNATURE

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MISTRETTA, ANN P
1351 ELDRON BLVD SE
PALM BAY FL 32909 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Mary Ann Cate Board
POB 100182
Palm Bay, FL 32909 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
CAROTHERS, DONALD L
1354 SE ELDRON BLVD
PALM BAY FL 32909 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Gary Wolfe
Vice-President
1394 Ruffin Cir. SE
Palm Bay, FL 32909 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WOODARD, PATRICK
641 ROTH CT SE
PALM BAY FL 32909 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Stan Campbell
705 Simon St. SE Treas.
Palm Bay, FL 32909 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
WOLFE, ROSALYN
1394 RUFFIN CIRCLE, SE
PALM BAY FL 32909 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Roy Flowers
Board
779 Raleigh Rd, SE
Palm Bay 32909 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RADWAY, LUTHER Board
701 ALFORD ST, SE
PALM BAY FL 32909 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Harold Clarke
Director
801 Sevens Gables Cir. SE
Palm Bay, 32909 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SIPARA, PATRICIA
678 SEVEN GABLES, CIR
PALM BAY FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Palm Bay, 32909 ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/02 321
733-0229

Date

Daytime Phone #

CR2E037 (9/01)