

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18466

**FILED**  
**Jul 25, 2006**  
**Secretary of State**

**Entity Name:** OAK KNOLL II AT PINE ISLAND RIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8930 STATE ROAD 84, P.O. BOX 221  
DAVIE, FL 33324

**New Principal Place of Business:**

6915 TAFT ST  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

8930 STATE ROAD 84, P.O. BOX 221  
DAVIE, FL 33324

**New Mailing Address:**

6915 TAFT ST  
HOLLYWOOD, FL 33024

**FEI Number:** 65-0039075      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

INKLEBARGER, JAMES W  
2321 S.W. 98TH TERRACE  
FT. LAUDERDALE, FL 33324      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: MORRISON, TOM  
Address: 2030 SW 97 LN  
City-St-Zip: FT. LAUDERDALE, FL 33324

Title: STD      ( ) Delete  
Name: GONSALVES, JANE  
Address: 9910 S.W. 23RD STREET  
City-St-Zip: FT. LAUDERDALE, FL 33324

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

Title: P      (X) Change ( ) Addition  
Name: INKLEBARGER, JAMES  
Address: 2321 SW 98 TERR  
City-St-Zip: FT. LAUDERDALE, FL 33324

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 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: JAMES INKLEBARGER

P

07/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date