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NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State
04-08-1999 90036 036 ****70.00

DOCUMENT # N31097 (1)

1. Corporation Name

OAK LANDING HOMEOWNERS ASSOCIATION, INC

Principal Place of Business | Mailing Address

2. Principal Place of Business 21 P.O. BOX 684 Suite, Apt. #, etc. 22 City & State 23 VALRICO, FL Zip 24 33594 Country 25 US	2a. Mailing Address 26 P.O. BOX 684 Suite, Apt. #, etc. 27 City & State 28 VALRICO, FL Zip 29 33594 Country 30 US	3. Date Incorporated or Qualifed 03/09/1989 4. FEI Number 59-2926866 ☐ Applied For ☐ Not Applicable 5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

POTTER, JOHN E
2426 OAK LANDING DRIVE
BRANDON, FL 33511

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	NUNNELEY, JIM	1.2 NAME	
STREET ADDRESS	2417 OAK LANDING DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON, FL 33511-7607	1.4 CITY-ST-ZIP	
TITLE	V/D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HOLSONBACK, JACK	2.2 NAME	
STREET ADDRESS	2414 OAK LANDING DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON, FL 33511-7607	2.4 CITY-ST-ZIP	
TITLE	V/T/D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	POTTER, JOHN	3.2 NAME	
STREET ADDRESS	2426 OAK LANDING DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON, FL 33511-7607	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E037 (11/98)

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, with all other like empowered.

SIGNATURE: _____ 4/1/99 (813) 661-6339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #