FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2002 8:00 am Secretary of State **DOCUMENT # N31097** 1. Entity Name OAK LANDING HOMEOWNERS ASSOCIATION, INC. 04-11-2002 90657 005 ****61.25 Principal Place of Business Mailing Address P O BOX 684 P O BOX 684 VALRICO FL 33594 VALRICO FL 33594 2. Principal Place of Business Mailing Address O. Box DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2926866 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent nne (P.O. Box Number is Not Acceptable) MCCARTHY, SUSAN W. 2505 OAK LANDING DR BRANDON FL 33511 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 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE PD 🛣 Change Addition TITLE Delete stacia Holsen NAME LEE, MARY NAME 2414 Oak Landing Dr. STREET ADDRESS STREET ADDRESS 2418 OAK LANDING DR brandon, FL 33511 CITY-ST-ZIP CITY-ST-ZIP BRANDON FL 33511-7607 athy van Eepoel Change ☐ Addition TITLE Delete TITLE NAME NUNNELEY, VICTORIA NAME STREET ADDRESS STREET ADDRESS 2417 OAK LANDING DR CITY-ST-7IP CITY-ST-ZIP BRANDON FL 33511-7607 STD Lynne Martiny Change ☐ Addition Delete TITLE 😓 - 🕹 NAME MCCARTHY, SUSAN NAME adia carlanding Dr. STREET ADDRESS STREET ADDRESS 2505 OAK LANDING DR CITY-ST-ZIP CITY-ST-ZIP Brandon, FL BRANDON FL 33511-7607 ☐ Change, ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

813-655-4566