2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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DOCUMENT # N31097

1. Entity Name
OAK LANDING HOMEOWNERS ASSOCIATION, INC.

1/1

Principal Place of Business

P O BOX 684

VALRICO, FL 33594 US

Mailing Address

P O BOX 684

VALRICO, FL 33594 US

FILED Feb 12, 2007 8:00 am Secretary of State

01-12-2007 90017 025 ****61.25

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01052007 No Chg-NP

CR2E037 (4/06)

4.	FEI Number 59-2926866	 Applied For Nor Applicable
5.	Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BORKMAN, KARL 2424 OAK LANDING DR. BRANDON, FL 33511

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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. † am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or protect name of registered agent and too # applicable. PROTE: Registered Agent agriculture required when remotating) OATE									
The control of the co									
	filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS			<u> </u>				
ITILE NAME	PD WILSON, DAVID		i						
STREET ADDRESS CITY-ST-ZIP	2417 OAK LANDING DR BRANDON, FL 33511				!				
TITLE	VD								
NAME	RYAN, TIMOTHY								
STREET ADORESS	ADDRESS 2420 OAK LANDING DR								
CITY-ST-ZIP	BRANDON, FL 33511								
TITLE	STD								
NAME	BORKMAN, KARL								
STREET ADDRESS	2421 OAK LANDING DR			DO	NOT WRITE				
CITY-SI-ZIP	SI-ZIP BRANDON, FL 33511		DO NOT WRITE						
ITLE				IN	THIS SPACE				
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12. Thereby cartify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver of trustee employedge to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter of a placeholder or on an attachment with an addressed with full other like appointment.

SIGNATURE: