

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004915

**FILED**  
**Feb 07, 2010**  
**Secretary of State**

**Entity Name:** OAK TRACE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

17740 OAK BRIDGE ST  
TAMPA, FL 33647

**New Principal Place of Business:**

17759 OAK BRIDGE ST.  
TAMPA, FL 33647

**Current Mailing Address:**

17759 OAK BRIDGE ST  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 59-3244768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FABREO, ROMEO  
17759 OAK BRIDGE ST  
TAMPA, FL 33647 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: DT  
Name: FABREO, ROMEO  
Address: 17759 OAK BRIDGE ST  
City-St-Zip: TAMPA, FL 33647

Title: DP  
Name: ZOVKO, BARBARA  
Address: 17762 OAK BRIDGE ST  
City-St-Zip: TAMPA, FL 33647

Title: DS  
Name: ROGERS, TERESA  
Address: 17765 OAK BRIDGE ST  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: VELAZQUEZ, SUSAN  
Address: 17750 OAK BRIDGE ST.  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: FIQUEROA, EVELYN  
Address: 17752 OAK BRIDGE ST.  
City-St-Zip: TAMPA, FL 33647

I hereby 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 all other like empowered.

SIGNATURE: ROMEO FABREO

DT

02/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date