

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002283

1. Corporation Name

OAK RIVER HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1817 S.W. 24 Ave

1817 S.W. 24 Ave

Ft. LAUDERDALE, FL.

Ft. LAUD., FL. 33312

33312

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
05/09/1994

3a. Date of Last Report
4-95

4. FEI Number

65-0500927

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

SOKOLOFF, ELLEN

1800 S.W. 24 Ave.

Ft. LAUDERDALE, FL. 33312

81 Name

NOVAK, GREGORY

82 Street Address (P.O. Box Number is Not Acceptable)

1817 S.W. 24 Ave.

83

84 City

Ft. LAUDERDALE

FL

85 Zip Code

33312

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

GREGORY A. NOVAK - GREGORY A. NOVAK

President

4-12-96

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P/D SOKOLOFF, ELLEN 1800 SW 24 AVE Ft. LAUD., FL. 33312

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V/D HAUGEN, NANCY 1701 SW 24 AVE Ft. LAUD., FL. 33312

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SB McWilliams, Patrick 2444 SW 19 St. Ft. LAUD., FL. 33312

TITLE NAME STREET ADDRESS CITY-ST-ZIP

T/D NOVAK, Greg 1817 SW 24 AVE Ft. LAUD., FL. 33312

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

P/D NOVAK, Gregory 1817 SW 24 AVE Ft. LAUD., FL. 33312

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

V/D WUNSCH, Deborah 1747 SW 24 AVE Ft. LAUD., FL. 33312

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

← SAME

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

T/D Lynch, Marsha 2505 SW 19 St. Ft. LAUD., FL. 33312

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

1.00001002721

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SIGNATURE:

GREGORY A. NOVAK

4-11-96

Date

(954) 954-587-7144

Daytime Phone #

SG 5-1-96

CR2E037 (12/95)