

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003358

FILED
Apr 09, 2012
Secretary of State

Entity Name: OAKMONT AT THE LAKES AT THREE OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0901611 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT
6719 WINKLER RD
STE 200
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD
STE 200
FT MYERS, FL 33919 US

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: JOHN M. STROHM

04/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ROY, PATRICIA
Address: 17983 OAKMONT RIDGE CIRCLE
City-St-Zip: FORT MYERS, FL 33967

Title: VP
Name: HOMAN, DEAN
Address: 17708 OAKMONT RIDGE CIRCLE
City-St-Zip: FORT MYERS, FL 33967

Title: SD
Name: BHATT, HARSHAD
Address: 17895 OAKMONT RIDGE CIRCLE
City-St-Zip: FORT MYERS, FL 33967

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: PATRICIA ROY

PD

04/09/2012

Electronic Signature of Signing Officer or Director

Date