

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # **N93000004915 (5)**

1. Corporation Name

**OAK TRACE NEIGHBORHOOD ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**7628 N 56TH ST  
STE 8  
TAMPA FL 33617  
US**

**7628 N. 56TH STREET  
SUITE 8  
TAMPA FL 33617**

3. Date Incorporated or Qualified

**11/01/1993**

4. FEI Number

**59-3244768**

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

**21 Suite, Apt. #, etc.**

**26 Suite, Apt. #, etc.**

**22 City & State**

**27 City & State**

**23 Zip Country**

**28 Zip Country**

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SPIVEY, WILLIAM C.  
7628 N. 56TH STREET  
SUITE 8  
TAMPA FL 33617**

**81 Name STEVE MONTEITH**

**82 Street Address (P.O. Box Number is Not Acceptable)  
17764 OAK BRIDGE ST.**

**83**

**84 City TAMPA**

**FL 85 Zip Code 33647**

11. Pursuant to the provisions of Sections 617.0532 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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE PD** ☒ DELETE  
**NAME HENDERSON, PATRICIA**  
**STREET ADDRESS 17766 OAK BRIDGE**  
**CITY-ST-ZIP TAMPA FL**

**1.1 TITLE PD** ☐ Change ☒ Addition  
**1.2 NAME MONTEITH, STEVE**  
**1.3 STREET ADDRESS 17764 OAK BRIDGE STREET**  
**1.4 CITY-ST-ZIP TAMPA, FL 33647**

**TITLE V/D** ☒ DELETE  
**NAME VELAZQUEZ, ANTHONY**  
**STREET ADDRESS 17752 OAK BRIDGE ST**  
**CITY-ST-ZIP TAMPA FL 33647**

**2.1 TITLE SD** ☐ Change ☒ Addition  
**2.2 NAME EVERETT, KENNETH**  
**2.3 STREET ADDRESS 17769 OAK BRIDGE STREET**  
**2.4 CITY-ST-ZIP TAMPA, FL 33647**

**TITLE T/D** ☒ DELETE  
**NAME MIRANDA, JOE**  
**STREET ADDRESS 17763 OAKBRIDGE**  
**CITY-ST-ZIP TAMPA FL**

**3.1 TITLE TD** ☐ Change ☒ Addition  
**3.2 NAME VELAZQUEZ, SUSAN**  
**3.3 STREET ADDRESS 17750 OAK BRIDGE STREET**  
**3.4 CITY-ST-ZIP TAMPA, FL 33647**

**TITLE S/D** ☒ DELETE  
**NAME HENDERSON, PATRICIA**  
**STREET ADDRESS 17752 OAK BRIDGE ST**  
**CITY-ST-ZIP TAMPA FL 33647**

**4.1 TITLE** ☐ Change ☐ Addition  
**4.2 NAME**  
**4.3 STREET ADDRESS**  
**4.4 CITY-ST-ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**5.1 TITLE** ☐ Change ☐ Addition  
**5.2 NAME**  
**5.3 STREET ADDRESS**  
**5.4 CITY-ST-ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**6.1 TITLE** ☐ Change ☐ Addition  
**6.2 NAME**  
**6.3 STREET ADDRESS**  
**6.4 CITY-ST-ZIP**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE **STEVE MONTEITH**

CR2E037 (10/97)