2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23535

FILED Mar 30, 2005 Secretary of State

Entity Name: THE OAKS OF WEKIWA OWNERS ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 **New Mailing Address: Current Mailing Address:** 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 US FEI Number: 59-3060940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT, INC. 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HEIGHTON, CINDY ROWELL, SHAWN Name: Name: 2150 WEKIWA OAKS DR Address: 1003 PIEDMONT OAKS DR Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703 Title: () Delete Title: (X) Change () Addition SNELL, RICHARD Name: SNELL, RICHARD Name: Address: 996 PIEDMONT OAKS DRIVE Address: 996 PIEDMONT OAKS DRIVE City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703 Title: SD Title: STD (X) Change () Addition () Delete LLOYD, LYN LLOYD, LYN Name: Name: 2198 WEKIWA OAKS DR 2198 WEKIWA OAKS DR Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703 Title: TD (X) Delete Title: () Change () Addition Name: CALIO, HELEN Name: 1081 PIEDMONT OAKS DR Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: () Change () Addition EDMAN, VINCE Name: Name: 1061 PIEDMONT OAKS DR Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: (X) Change () Addition MELLOTT, DARLENE MELLOTT, DARLENE Name: Name: Address: 974 PIEDMONT OAKS DR Address: 974 PIEDMONT OAKS DR APOPKA, FL 32703 APOPKA, FL 32703 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD SNELL PD 03/30/2005