

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2007 8:00 am
Secretary of State

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1. Entity Name

OAKPARK OWNERS' ASSOCIATION, INC.



Principal Place of Business

3604 HARDEN BLVD
LAKELAND, FL 33803 US

Mailing Address

3604 HARDEN BLVD
LAKELAND, FL 33803 US

66003538



01152007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3275221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MASS, LEONARD
3604 HARDEN BOULEVARD
LAKELAND, FL 33803

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
SPARKS, GRADY
79-285 RANCHO LA QUINTA DR
LA QUINTA, CA 92253

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
LONG, WILLIAM B
530 BEACON PARKWAY WEST
BIRMINGHAM, AL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
FUSSELL, DONALD R
3604 HARDEN BLVD
LAKELAND, FL 33803

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
MASS, LEONARD
3604 HARDEN BOULEVARD
LAKELAND, FL 33803

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Leonard Mass **LEONARD MASS**

FEB. 13, 2007 863-647-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #