

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25299

FILED
Aug 02, 2008
Secretary of State

Entity Name: OAK RIDGE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AWAKENING ASSOC. MGMT., INC.
4213 COUNTY RD 218 SUITE 1
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

C/O 2300TWELVE OAKS DRIVE
K4
ORANGE PARK, FL 32065 US

Current Mailing Address:

C/O AWAKENING ASSOC. MGMT., INC.
4213 COUNTY RD 218 SUITE 1
MIDDLEBURG, FL 32068 US

New Mailing Address:

C/O 2300TWELVE OAKS DRIVE
K4
ORANGE PARK, FL 32065 US

FEI Number: 57-0864477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DELCOMYN, VINA
4213 COUNTY ROAD, 218, STE 1
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

TEACHEY, RONALD
C/O 2300 TWELVE OAKS DR
K4
ORANGE PARK, FL 32065 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: RONALD TEACHEY

08/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BROSCHE, ERIC
Address: 2300 12 OAKS DR K4
City-St-Zip: ORANGE PARK, FL 32065

Title: DP () Delete
Name: DENNING, PATRICIA
Address: 2300 TWELVE OAKS DR K-6
City-St-Zip: ORANGE PARK, FL 32065

Title: DT () Delete
Name: COCHRAN, JUDITH
Address: 2300 TWELVE OAKS DRIVE, #K-5
City-St-Zip: ORANGE PARK, FL 32065

Title: D () Delete
Name: TEACHEY, RONALD
Address: P.O. BOX 1191
City-St-Zip: ORANGE PARK, FL 32067

Title: DVP () Delete
Name: SALAZAR, DEBBIE
Address: 2300 TWELVE OAKS DR #K-3
City-St-Zip: ORANGE PARK, FL 32065

Title: D (X) Delete
Name: ENGLAND, JUNE
Address: 2300 TWELVE OAKS DR JL
City-St-Zip: ORANGE PARK, FL 32065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: BROSCHE, ERIC
Address: 2300 TWELVE OAKS DR K4
City-St-Zip: ORANGE PARK, FL 32065

Title: DS (X) Change () Addition
Name: COCHRAN, JUDITH
Address: 2300 TWELVE OAKS DR K5
City-St-Zip: ORANGE PARK, FL 32065

Title: DT (X) Change () Addition
Name: SALAZAR, DEBRA
Address: 2300 TWELVE OAKS DRIVE, K3
City-St-Zip: ORANGE PARK, FL 32065

Title: DP (X) Change () Addition
Name: TEACHEY, RONALD
Address: P.O. BOX 1191
City-St-Zip: ORANGE PARK, FL 32067

Title: D (X) Change () Addition
Name: CAMPBELL, DAVE
Address: P.O. BOX 23003
City-St-Zip: JACKSONVILLE, FL 32241

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JUDITH COCHRAN

DS

08/02/2008

Electronic Signature of Signing Officer or Director

Date