

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003888

FILED
Apr 20, 2009
Secretary of State

Entity Name: OAK THORN AT LIVE OAK PRESERVE ASSOCIATION, INC.

Current Principal Place of Business:

16242 NORTH FLORIDA AVENUE
LUTZ, FL 33549

New Principal Place of Business:

4131 GUNN HWY
TAMPA, FL 33618

Current Mailing Address:

16242 NORTH FLORIDA AVENUE
LUTZ, FL 33549

New Mailing Address:

4131 GUNN HWY
TAMPA, FL 33618

FEI Number: 20-2691233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANDARC, INC
6150 STATE RD 70
BRADENTON, FL 34203 US

Name and Address of New Registered Agent:

BECKER & POLIAKOFF
311 PARK PLACE BLVD
SUITE 250
CLEARWATER, FL 33759 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: ELLEN HIRSCH DE HAAN

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FEATHER, RICK
Address: 16242 NORTH FLORIDA AVENUE
City-St-Zip: LUTZ, FL 33549

Title: VP () Delete
Name: ARCARO, LAUREN
Address: 16242 NORTH FLORIDA AVENUE
City-St-Zip: LUTZ, FL 33549

Title: T () Delete
Name: MEADOWS, ROBERT
Address: 16242 NORTH FLORIDA AVENUE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FEATHER, RICK
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change () Addition
Name: ARCARO, LAUREN
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: T (X) Change () Addition
Name: MEADOWS, ROBERT
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

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: RICK FEATHERS

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date