

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003358

**FILED  
Apr 03, 2013  
Secretary of State  
CC0758519398**

**Entity Name:** OAKMONT AT THE LAKES AT THREE OAKS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ALLIANT PROPERTY MANAGEMENT, LLC  
6719 WINKLER ROAD, SUITE 200  
FT MYERS, FL 33919

**Current Mailing Address:**

C/O ALLIANT PROPERTY MANAGEMENT, LLC  
6719 WINKLER ROAD, SUITE 200  
FT MYERS, FL 33919

**FEI Number: 65-0901611**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ALLIANT PROPERTY MANAGEMENT, LLC  
6719 WINKLER RD  
STE 200  
FT MYERS, FL 33919 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

**Officer/Director Detail :**

Title PD  
Name ROY, PATRICIA  
Address 17983 OAKMONT RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33967

Title VP  
Name HOMAN, DEAN  
Address 17708 OAKMONT RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33967

Title SD  
Name BHATT, HARSHAD  
Address 17895 OAKMONT RIDGE CIRCLE  
City-State-Zip: FORT MYERS FL 33967

*I hereby 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 all other like empowered.*

**SIGNATURE: PATRICIA ROY**

**PRESIDENT**

**04/03/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date