2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716986

Apr 30, 2009 Secretary of State

Entity Name: OAK HILLS CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

5150 SW 40TH AVE

FT LAUDERDALE, FL 33314

Current Mailing Address: New Mailing Address:

4350 SW 59 AVE BLDG A **DAVIE, FL 33314**

FEI Number: 59-1368757 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:

NACHMAN, IRVIN W 4441 STIRLING ROAD DAVIE, FL 33314

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

(X) Change () Addition

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete BLOSTEIN, LOLITA BLOSTEIN, LOLITA Name: Name: 5140 SW 40TH AVE UNIT 6C Address: 5140 SW 40TH AVE UNIT 6C Address: City-St-Zip: FT LAUDERDALE, FL 33314 City-St-Zip: FT LAUDERDALE, FL 33314

Title: DVP Title: () Delete (X) Change () Addition ANNE, GABLE Name: ANNE, GABLE Name:

Address: 5160 SW 40 AVE D-6 Address: 5160 SW 40 AVE D-6 City-St-Zip: DANIA BEACH, FL 33314 City-St-Zip: DANIA BEACH, FL 33314

Title: DTS () Delete Title: DVP (X) Change () Addition LOVE, MARGARET LOVE, MARGARET Name: Name:

5120 SW 40 AVE A-6 Address: Address: 5120 SW 40 AVE A-6 City-St-Zip: DANIA BEACH, FL 33314 City-St-Zip: DANIA BEACH, FL 33314

Title: () Delete Title: DST () Change (X) Addition

Name: Name: FRAGA, MATTHEW Address: Address: 5130 SW 40TH AVE B-23 City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33314

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: ANNE GABLE Ρ 04/30/2009