

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721610

FILED
Apr 08, 2009
Secretary of State

Entity Name: OAKWOOD VILLAS CONDOMINIUM OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5050 LIVE OAK CIRCLE
BRADENTON, FL 34207

New Principal Place of Business:

Current Mailing Address:

4301 32ND ST. W.
STE. A-20
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 59-1561468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C & S CONDOMINIUM MANAGEMENT SERVICE INC
4301 32ND STREET WEST
SUITE A20
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUDSON, JANET
Address: 5053 LIVE OAK CIRCLE
City-St-Zip: BRADENTON, FL 34207

Title: VD () Delete
Name: SERDY, MICHAEL
Address: 5051 RED OAK PLACE
City-St-Zip: BRADENTON, FL 34207

Title: TD () Delete
Name: GRAHAM, GEOFF
Address: 5019 LIVE OAK CIRCLE
City-St-Zip: BRADENTON, FL 34207

Title: SD () Delete
Name: BOWMAN, MARIAN
Address: 5034 LIVE OAK CR.
City-St-Zip: BRADENTON, FL 34207

Title: D () Delete
Name: WEAVER, PHYLLIS
Address: 5020 LIVE OAK CIRCLE
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SD (X) Change () Addition
Name: SOLOMON, LETA
Address: 5008 LIVE OAK CR.
City-St-Zip: BRADENTON, FL 34207

Title: D (X) Change () Addition
Name: GARVEY, MARIE
Address: 5065 WHITE OAK CIRCLE
City-St-Zip: BRADENTON, FL 34207

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: JANET HUDSON

MRS.

04/08/2009

Electronic Signature of Signing Officer or Director

Date