

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726559

FILED
Feb 15, 2011
Secretary of State

Entity Name: SPRING OAKS HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

637 SPRING OAKS BLVD.
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

624 BILLS LANE
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

P.O. BOX 160232
ALTAMONTE SPRINGS, FL 32716 US

New Mailing Address:

FEI Number: 59-3454361 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DENMARK, JOHN D
637 SPRING OAKS BLVD.
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

DIAZ, MARGIE
625 PEACHWOOD DR
ALTAMONTE SPRINGS, FL 32714 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: MARGIE DIAZ

02/15/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T
Name: MARGIE, DIAZ
Address: P.O. BOX 160232
City-St-Zip: ALTAMONTE SPRINGS, FL 32716 02

Title: P
Name: KONSTAN, DAVID
Address: P.O. BOX 160232
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: VP
Name: KAUL, WARREN
Address: P.O. BOX 160232
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: S
Name: FRAGOSO, JUDY
Address: P.O. BOX 160232
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

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: MARGIE DIAZ

T

02/15/2011

Electronic Signature of Signing Officer or Director

Date