

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729113

FILED
Mar 11, 2008
Secretary of State

Entity Name: DELAND OAKS ASSOCIATION, INC.

Current Principal Place of Business:

100 EAST KENTUCKY AVENUE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

100 EAST KENTUCKY AVENUE
DELAND, FL 32724

New Mailing Address:

100 EAST KENTUCKY AVENUE
DELAND, FL 32724

FEI Number: 59-1724494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAYLOR, ROBERT L
850 CONCOURSE PKWY S
MAITLAND, FL 32751 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: P () Delete
Name: TOGLEMAN, KAREN S
Address: 100 E. KENTUCKY AVE
City-St-Zip: DELAND, FL 32724

Title: VP () Delete
Name: ORBERG, DERRICK
Address: 100 E. KENTUCKY AVE
City-St-Zip: DELAND, FL 32724

Title: S () Delete
Name: BROECKER, MARK
Address: 100 EAST KENNEDY AVE
City-St-Zip: DELAND, FL 32724

Title: T () Delete
Name: MIDDLETON, BARBARA
Address: 100 EAST KENNEDY AVE
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: CRILE, WESLEY
Address: 100 EAST KENNEDY AVE
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAUVEL, HOWARD L
Address: 100 E. KENTUCKY AVE
City-St-Zip: DELAND, FL 32724

Title: VP (X) Change () Addition
Name: WILLIAMS, DONNA
Address: 100 E. KENTUCKY AVE
City-St-Zip: DELAND, FL 32724

Title: S (X) Change () Addition
Name: LONG, ALICIA
Address: 100 EAST KENNEDY AVE
City-St-Zip: DELAND, FL 32724

Title: T (X) Change () Addition
Name: DEL RIO, GABRIEL
Address: 100 EAST KENNEDY AVE
City-St-Zip: DELAND, FL 32724

Title: D (X) Change () Addition
Name: DE SILVA, WILLIAM
Address: 100 EAST KENNEDY AVE
City-St-Zip: DELAND, FL 32724

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: WILLIAM DE SILVA

D

03/11/2008

Electronic Signature of Signing Officer or Director

Date