2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 09, 2008 8:00 am Secretary of State DOCUMENT # 737661 1. Entity Name. 04-09-2008 90019 050 ****70 00 OAKBROOK HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address ι 21045 COMMERCIAL TRAIL 21045 COMMERCIAL TRAIL **BOCA RATON FL 33486 BOCA RATON FL 33486** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite. Apr. #. etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-1797529 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LANG MANAGMENT CO Street Address (P.O. Box Number is Not Acceptable) 21045 COMMERCIAL TRAIL **BOCA RATON FL 33486** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if an pecable CATE (NOTE: Redistored Agont signature red ured when relestating) Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Due By May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delate TITLE Change ROBERTS, H. RICHARD NAME NAME 19661 OAKBROOK COURT STREET ADDRESS STREET ADDRESS BOCA RATON FL 33434 CITY-ST-ZIP CITY-ST-ZIP Delate 🔀 Change TITLE LEVINE, ELLIOT 19605 OAKBROOK CITCLE Boca Reton IFL 33434 TITLE LEVINE, ELLIOT NAME MAME 19605 OAKBROOK CIR STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** CITY-ST-ZIP CITY-ST-ZIP SD Delete TITLE TITLE ☐ Change Addition HIGIER, ROSS NAME NAME 19672 OAK BROOK CIRCLE STREET ADDRESS STREET ADDRESS BOCA RATON FL 33434 CITY-ST-ZIP CITY-ST-ZIP VD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME DELMAN, RALPH NAME 19600 OAKBROOK CIRCLE STREET ADDRESS STREET ADDRESS BOCA RATON FL 33434 CHTY-ST-ZIP CITY-ST-ZIP THILE Change TITLE Delete Addition KRAMER, DEBRA 19657 OCKDOOK CT BOCA RATON, FL 33434 ROTH, ARTHUR NAME NAME 19748 OAKBROOK CIRCLE STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete THIE TITLE Change Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11

if changed, or on an attachment with an address, with all other like empowered.