2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# 738836

Entity Name: OXFORD FOREST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8204 OXFORD FOREST DRIVE
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 24007
JACKSONVILLE, FL 32241 US

New Mailing Address:

FEI Number: 59-1670812 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

H. MARK HEEKIN
4540 SOUTHSIDE BLVD
STE 702
JACKSONVILLE, FL 32216 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: HUMPHREY, KAY
Address: 6808 CHERWELL LANE
City-St-Zip: JACKSONVILLE, FL 32217

Title: DS ( ) Delete
Name: ROOS, SHIRLEY
Address: 8204 OXFORD FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: TE ( ) Delete
Name: LINGLE, ALANA
Address: 4810 WINDRUSH LANE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete
Name: SZODY, AMY
Address: 4830 WINDRUSH LANE
City-St-Zip: JACKSONVILLE, FL 32217

Title: DIR ( ) Delete
Name: GARRITY, CHRISTINE
Address: 4800 CHERWELL LANE
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: PD ( ) Delete
Name: MECKE, MATTHEW
Address: 4814 CHERWELL LANE
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BILOTTI, BILL
Address: 4820 WINDRUSH LN.
City-St-Zip: JACKSONVILLE, FL 32217

Title: SD (X) Change ( ) Addition
Name: SZKODY, AMY
Address: 4830 WINDRUSH LN.
City-St-Zip: JACKSONVILLE, FL 32217

Title: TD (X) Change ( ) Addition
Name: PARR, PENNY
Address: 4802 EVENLODE LN.
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change ( ) Addition
Name: ROOS, SHIRLEY
Address: 8204 OXFORD FOREST DR.
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change ( ) Addition
Name: THOMPSON, MATTHEW
Address: 4817 WINDRUSH LN.
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: D (X) Change ( ) Addition
Name: ARMEL, VICKI
Address: 4822 WINDRUSH LN.
City-St-Zip: JACKSONVILLE, FL 32217

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: PENNY PARR TE 01/06/2009

Electronic Signature of Signing Officer or Director — Date