

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 8:00 am
Secretary of State

01-21-2005 90085 025 ****61.25

DOCUMENT # 744886 1. Entity Name ERROL OAKS, UNIT TWO HOMEOWNERS' ASSOCIATION, INCORPORATED			
Principal Place of Business 1427-D OAK PL APOPKA, FL 32712		Mailing Address 1427-D OAK PL APOPKA, FL 32712	
2. Principal Place of Business 1423-B OAK PLACE		3. Mailing Address 1423-B OAK PLACE	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State APOPKA, FL		City & State APOPKA, FL	
Zip 32712		Zip 32712	
Country USA		Country USA	
4. FEI Number 59-2195036		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCLEOD, WILLIAM J. ESQ 48 EAST MAIN STREET APOPKA, FL 32703		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when constituting)			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POOLE, RICARDO 1435-B OAK PL APOPKA, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KENNETH R. MALCHOW 1465 OAK PLACE APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HENRICKSON, CATHY J 1427-D OAK PL APOPKA, FL 32712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICHARD BURNSWORTH 1435-A OAK PLACE APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, JOYCE 1461 OAK PLACE APOPKA, FL 32712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRY DONAHUE 1437-C OAK PLACE APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILLIAMS, LORA E 1419F OAK PLACE APOPKA, FL 32712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARILYN CORBEIL 1423-B OAK PLACE APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LOSEN, WILLIAM B 1447 OAK PL APOPKA, FL 32712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 647, 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.			
SIGNATURE: <i>Cathy Henrickson</i> CATHY HENRICKSON		Date: 1-17-05 Daytime Phone #: 407-886-8784	