

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747632

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** OAKRIDGE VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4786 S. ATLANTIC AVE.  
4-B  
PONCE INLET, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DON BOOMSTRA  
4786 S. ATLANTIC UNIT A-2  
PONCE INLET, FL 32127

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GILBRERTA, WILLIAM D.  
4786 S. ATLANTIC AVE  
B-2-A-2  
PONCE INLET, FL 32127 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: VP  
Name: GILBREATH, WILLIAM D.  
Address: 4786 S. ATLANTIC AVE  
City-St-Zip: PONCE INLET, FL 32127

Title: PD  
Name: AMARA, ROBERT J.  
Address: 2750 S. RIDGEWOOD AVE., #36  
City-St-Zip: S. DAYTONA, FL 32119

Title: STD  
Name: BOOMSTRA, DON  
Address: 11958 80TH PL  
City-St-Zip: DYER, IN 46311

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: DON BOOMSTRA

STD

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date