2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # 753562

1. Entity Name
OAK CREEK AT COUNTRYSIDE PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3024 TANGLEWOOD DR CLEARWATER, FL 33761-1427 US	3024 TANGLEWOOD DR CLEARWATER, FL 33761-1427 US

01202007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2019094
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARPER, REX E
3024 TANGLE WOOD DR
CLEARWATER, FL 33761-1427

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000624096
02/14/07-80018-004 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HULSTEIN, KEES
STREET ADDRESS	3070 OAK CREEK DR N
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	TD
NAME	HARPER, REX E
STREET ADDRESS	3024 TANGLEWOOD DR
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	SD
NAME	MICHAELS, MARGARET
STREET ADDRESS	3056 OAK CREEK DR N]
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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 Chapter 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.

SIGNATURE: Rex E Harper Treas 1/31/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #