2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2010
Secretary of State

DOCUMENT# 754833

Entity Name: THE OAKS DWELLING-UNIT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

101 NORTH PINE ST
#5
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

101 NORTH PINE ST
#5
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

P.O. BOX 2043
NEW SMYRNA BEACH, FL 32170

New Mailing Address:

P.O. BOX 2043
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 59-2306265 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUTLER, EDNA
101 NORTH PINE ST
#5
NEW SMYRNA BEACH, FL 32169 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: P
Name: BUTLER, EDNA
Address: 101 NORTH PINE ST #5
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: VD
Name: SELLERS, JOHN
Address: 101 N PINE ST STE 7
City-St-Zip: NEW SMYRNA BEACH, FL 32170 US

Title: SD
Name: DAVIS, KATHY
Address: 101 NORTH PINE ST #8
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: TD
Name: BUTLER, EDNA
Address: 101 NORTH PINE ST #5
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: EDNA BUTLER P 01/18/2010

Electronic Signature of Signing Officer or Director — Date