## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#755068** 

FILED Jul 01, 2009 Secretary of State

Entity Name: WILD OAK BAY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 310 PEARL AVE SARASOTA, FL 34243 **Current Mailing Address: New Mailing Address:** 310 PEARL AVE SARASOTA, FL 34243 FEI Number: 59-1905962 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **DELLCOR MANAGEMENT** 310 PEARL AVE. SARASOTA, FL 34243 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition PEACOCK, MARILYN PEACOCK, MARILYN Name: Name: 6417 SUN EAGLE LANE Address: 6417 SUN EAGLE LANE Address: City-St-Zip: BRADENTON, FL 34210 City-St-Zip: BRADENTON, FL 34210 Title: ( ) Delete Title: () Change () Addition FACCIOLO, NICK Name: Name: Address: 6404 QUAIL HOLLOW PL Address: City-St-Zip: BRADENTON, FL 34210 City-St-Zip: Title: () Delete Title: () Change () Addition BOYD, WALLY Name: Name: 6315 QUAIL HOLLOW PLACE Address: Address: City-St-Zip: BRADENTON, FL 34210 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: THEILEN, MARION Name: PRENTICE, GEORGE 3702 QUAIL PLACE Address: Address: 6415 SUN EAGLE LANE City-St-Zip: BRADENTON, FL 34210 City-St-Zip: BRADENTON, FL 34210 Title: () Delete Title: () Change () Addition THEVENIN, ARTHUR Name: Name: 3615 QUAIL HOLLOW Address: Address: City-St-Zip: BRADENTON, FL 34210 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition MATTA, JUDY Name: Name: Address: Address: 6421 SUN EAGLE LANE BRADENTON, FL 34210 City-St-Zip: City-St-Zip:

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: NICK FACCIOLA T 07/01/2009