

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757017

FILED
Apr 01, 2009
Secretary of State

Entity Name: ROLLING OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1625 N.W. 188TH TERRACE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

1625 N.W. 188TH TERRACE
MIAMI, FL 33169

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:

ISLEY, BILLY
1740 NW 193RD ST
MIAMI, FL 33056 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: D () Delete
Name: CLARK, ALAN
Address: 1760 NW 193RD
City-St-Zip: MIAMI GARDENS, FL

Title: PD () Delete
Name: ISLEY, BILLY
Address: 1740 N.W. 193RD ST.
City-St-Zip: MIAMI GARDENS, FL

Title: TD () Delete
Name: DUPREEE, HOWARD
Address: 1740 N.W. 193RD ST.
City-St-Zip: MIAMI GARDENS, FL

Title: VD () Delete
Name: JENKINS, NELSON
Address: 1743 N.W. 193RD ST.
City-St-Zip: MIAMI GARDENS, FL

Title: D () Delete
Name: FERGUSON, BETTY
Address: 1625 N.W. 188TH TER
City-St-Zip: MIAMI GARDENS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CLARK, ALAN
Address: 1760 NW 193RD
City-St-Zip: MIAMI GARDENS, FL 33056

Title: PD (X) Change () Addition
Name: ISLEY, BILLY
Address: 1740 N.W. 193RD ST.
City-St-Zip: MIAMI GARDENS, FL 33056

Title: TD (X) Change () Addition
Name: DUPREEE, HOWARD
Address: 1740 N.W. 193RD ST.
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VD (X) Change () Addition
Name: JENKINS, NELSON
Address: 1743 N.W. 193RD ST.
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D (X) Change () Addition
Name: FERGUSON, BETTY
Address: 1625 N.W. 188TH TER
City-St-Zip: MIAMI GARDENS, FL 33169

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: BETTY T. FERGUSON

D

04/01/2009

Electronic Signature of Signing Officer or Director

Date