## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 757473** 

FILED Apr 21, 2009 Secretary of State

Entity Name: OAKWOOD VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

100 VOSS CT. 107 VOSS CT

SEBRING, FL 33876 SEBRING, FL 33876

Current Mailing Address: New Mailing Address:

RUTH K. DAVIS, INC. RUTH K. DAVIS, INC

1981 US 27 SOUTH 1981 US HIGHWAY 27 SOUTH

SEBRING, FL 33870 SEBRING, FL 33870

FEI Number: 59-2164488 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RUTH K. DAVIS, INC.

1981 US 27 SOUTH

SEBRING, FL 33870 US

RUTH K. DAVIS REAL ESTATE, INC

1981 US HIGHWAY 27 SOUTH

SEBRING, FL 33870 US

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: RUTH K. DAVIS 04/21/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONAL ADDITIONA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 BENDER, JOHN
 Name:
 BENDER, JOHN

 Address:
 107 VOSS COURT
 Address:
 107 VOSS COURT

 City-St-Zip:
 SEBRING, FL 33876
 City-St-Zip:
 SEBRING, FL 33876

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 BIRKHOLD, BRUCE
 Name:
 DOWDING, IÂN

 Address:
 104 VOSS CT
 Address:
 106 VOSS COURT

 City-St-Zip:
 SEBRING, FL 33876
 City-St-Zip:
 SEBRING, FL 33876

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf VP} \qquad ({\sf X}) \, {\sf Change} \ (\ ) \, {\sf Addition}$ 

 Name:
 ALFEO, VINCENT
 Name:
 ALFEO, VINCENT

 Address:
 115 VOSS CT.
 Address:
 115 VOSS CT.

 City-St-Zip:
 SEBRING, FL 33876
 City-St-Zip:
 SEBRING, FL 33876

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: JOHN BENDER P 04/21/2009