

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 25, 2001 8:00 am**  
**Secretary of State**

01-25-2001 90156 030 \*\*\*\*61.25

**DOCUMENT # 758880**

1. Entity Name

**OAK TREE HOMEOWNER'S ASSOCIATION, INC.**

Principal Place of Business

C/O DUANE SMERYAGE  
 2744 OAK TREE LANE  
 FT. LAUDERDALE FL 33309-6700

Mailing Address

C/O DUANE SMERYAGE  
 2744 OAK TREE LANE  
 FT. LAUDERDALE FL 33309-6700

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0143503**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**STRUVE, DAVID C**  
**2760 OAKTREE LANE**  
**FT. LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

TITLE **T** ☐ Delete  
 NAME **SMERYAGE, DUANE**  
 STREET ADDRESS **2744 OAK TREE LANE**  
 CITY-ST-ZIP **FORT LAUDERDALE FL**

TITLE **VP** ☐ Delete  
 NAME **BOSS, RON**  
 STREET ADDRESS **2768 OAK TREE LANE**  
 CITY-ST-ZIP **FORT LAUDERDALE FL**

TITLE **D** ☐ Delete  
 NAME **WHITE, HARVEY**  
 STREET ADDRESS **2685 OAK TREE DR**  
 CITY-ST-ZIP **FT LAUD FL**

TITLE **S** ☐ Delete  
 NAME **SCOTT, BILL**  
 STREET ADDRESS **2704 OAK TREE DR**  
 CITY-ST-ZIP **FT LAUD FL**

TITLE **P** ☐ Delete  
 NAME **STAUVE, DAVE**  
 STREET ADDRESS **2950 OAK TREE DRIVE**  
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☐ Delete  
 NAME **BROAD, RICHARD**  
 STREET ADDRESS **2400 W. PROSPECT RD.**  
 CITY-ST-ZIP **FT. LAUDERDALE FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Duane Smeryage* **DUANE SMERYAGE**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/16/01 954-733-7720**  
 Date Daytime Phone #

CR2E037 (10/00)