

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760078

FILED  
Jan 18, 2008  
Secretary of State

**Entity Name:** THE OAKS UNIT III CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

VAN GUARD MANAGEMENT  
9300 N. 16TH ST.  
TAMPA, FL 33612 US

**New Principal Place of Business:**

**Current Mailing Address:**

VAN GUARD MANAGEMENT  
9300 N. 16TH ST.  
TAMPA, FL 33612 US

**New Mailing Address:**

**FEI Number:** 59-2267880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WINFIELD, JANET  
9300 N. 16 ST.  
TAMPA, FL 33612 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 ( ) Delete  
Name: ADES, ARI  
Address: 4207 WINDING MOSS TRAIL #J-103  
City-St-Zip: TAMPA, FL 33613

Title: VP ( ) Delete  
Name: HAMMOND, LEON  
Address: 9016 QUAIL CREEK DR.  
City-St-Zip: TAMPA, FL 33647

Title: ST ( ) Delete  
Name: DEPONTE, MICHAEL  
Address: 4209 WINDING MOSS TRAIL - #203  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JANET WINFIELD

AGEN

01/18/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date