

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 760128	
1. Entity Name LITTLE OAKS HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business C/O BARRY L CLAYTON 18314 LITTLE OAKS DR JUPITER, FL 33458 US	Mailing Address C/O BARRY L CLAYTON 18314 LITTLE OAKS DR JUPITER, FL 33458 US
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02092006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2696340	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CLAYTON, BARRY L
18314 LITTLE OAKS DR
JUPITER, FL 33458**

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

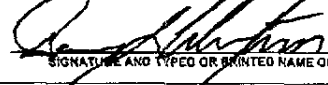
Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000447996 03/08/06-80078-020 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD CLAYTON, BARRY 18314 LITTLE OAKS DR JUPITER, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD MCALICE, TIM 18315 LITTLE OAKS DR JUPITER, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD BOSHER, VIRGINIA 18301 OAK LEAF DR JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Barry L. Clayton**
TREASURER
2/23/06 561-745-0345
Date Daytime Phone