2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761553

FILED Feb 22, 2012 Secretary of State

Entity Name: OAKLAKE CENTRE OFFICE CONDOMINIUM, INC.

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

2595 TAMPA ROAD 2595 TAMPA RD

SUITE L SUITE L

PALM HARBOR, FL 34684 US PALM HARBOR, FL 34684 US

Current Mailing Address: New Mailing Address:

2595 TAMPA ROAD 2595 TAMPA RD

SUITE L SUITE L

PALM HARBOR, FL 34684 US PALM HARBOR, FL 34684 US

FEI Number: 59-2353468 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:

SARGENT, JANE SEC. PITTENGER, JANE A 2595 TAMPA RD. STE L 2595 TAMPA RD

PALM HARBOR, FL 34684 US SUITE L
PALM HARBOR, FL 34684 US
PALM HARBOR, FL 34684 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: JANE A. PITTENGER 02/22/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

 Name:
 PATEL, DIVYANG B

 Address:
 2595 TAMPA RD. STE. B

 City-St-Zip:
 PALM HARBOR, FL 34684 US

Title: D

 Name:
 EPSTEIN, JOEL

 Address:
 2595 TAMPA RD. STE. O

 City-St-Zip:
 PALM HARBOR, FL 34684 US

Title:

 Name:
 GOMEZ, MARITZA

 Address:
 2595 TAMPA RD. STE. Q

 City-St-Zip:
 PALM HARBOR, FL. 34684 US

Title: D

 Name:
 KUNDRA, NAVNIT

 Address:
 2595 TAMPA RD. STE. S

 City-St-Zip:
 PALM HARBOR, FL. 34684 US

Title:

 Name:
 DURYEA, PAUL

 Address:
 2595 TAMPA RD. STE. I

 City-St-Zip:
 PALM HARBOR, FL. 34684 US

Title:

 Name:
 KHADEMI, ARDESHIR

 Address:
 2595 TAMPA RD. STE. R

 City-St-Zip:
 PALM HARBOR, FL 34684 US

I hereby 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 all other like empowered.

SIGNATURE: DR. DIVYANG PATEL P 02/22/2012