FILE NOW: FILING FEE IS $61.25

FILED
Apr 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **762127** **(9)**

1. Corporation Name

OAKLAND HILLS APARTMENTS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2857 N.E. 32 STREET FT LAUDERDALE FL 33306	2857 N.E. 32 STREET FT LAUDERDALE FL 33306-3007

3. Date Incorporated or Qualified: 02/26/1982
3a. Date of Last Report: 12/05/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-1448339 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MYRESS, MYRESS
2857 N.E. 32 STREET
FT LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

81 Name: DAWN FLAHERTY
82 Street Address (P.O. Box Number is Not Acceptable): 2857 NE 32nd STREET
83
84 City: FORT LAUDERDALE **FL** 85 Zip Code: 33306

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Dawn Flaherty Pres. DATE: 04-10-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ALEXANDRO, LEE 2857 N.E. 32 STREET FT LAUDERDALE FL 33306	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD DAWN FLAHERTY 2857 NE 32nd STREET FT LAUDERDALE FL 33306	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD THOMAS, SHERMAN A 2857 N.E. 32 STREET FT LAUDERDALE FL 33306	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	SD JOHN R EBERT 2857 NE 32nd STREET FT LAUDERDALE FL 33306	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD COWLE, EILEEN 2857 N.E. 32 STREET FT LAUDERDALE FL 33306	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	TD MYRESS M MATHEW 2857 NE 32nd STREET FT LAUDERDALE FL 33306	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MATHEW, MYRESS M 2857 N.E. 32 STREET FT LAUDERDALE FL 33306	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D LEE ALEXANDRO 2857 NE 32nd STREET FT LAUDERDALE FL 33306	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D EILEEN COWLE 2857 NE 32nd STREET FT LAUDERDALE 33306	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dawn Flaherty QUALIFIED Dawn Flaherty (954) 630-8900 04-10-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0000647