## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#765670** 

**FILED** Feb 03, 2011 Secretary of State

Entity Name: ARBOR OAKS HOMEOWNERS' ASSOCIATION, INC.

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

533 N. NOVA ROAD SUITE 215A ORMOND BEACH, FL 32174

**New Mailing Address: Current Mailing Address:** 

533 N. NOVA ROAD SUITE 215A ORMOND BEACH, FL 32174

FEI Number: 59-2542531 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:

LOWE, SHERYL T 533 N. NOVA ROAD SUITE 215A ORMOND BEACH, FL 32174 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: Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

PAGAN, LAURA Name: Address: 10 OAKWOOD PARK City-St-Zip: ORMOND BEACH, FL 32174

Title:

Name: LEVERING, ROSE Address: 42 ORCHARD LANE City-St-Zip: ORMOND BEACH, FL 32176

Title:

FULLER, JENNIFER Name: Address: 8 OAKWOOD PARK City-St-Zip: ORMOND BEACH, FL 32174

Title:

Name: LINGLE, WEBB Address: 24 OAKWOOD PARK City-St-Zip: ORMOND BEACH, FL 32174

Title:

BRAND, TAMMY Name: 17 OAKWOOD PARK Address: ORMOND BEACH, FL 32174 City-St-Zip:

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: JENNIFER FULLER Ρ 02/03/2011