## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765955** 

FILED Jun 15, 2009 Secretary of State

Entity Name: BRANDON OAKES HOMEOWNERS ASSOCIATION, INC. #1

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

2218 HWY 44 WEST INVERNESS, FL 34453

Current Mailing Address: New Mailing Address:

2218 HWY 44 WEST INVERNESS, FL 34453

FEI Number: 59-3074027 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

NELSON, JOHN A.. 2218 HWY 44 WEST INVERNESS, FL 34453 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:

Clarkeria Cinnakura of Davietanad Araut

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: COUTU, NICHOLAS Name: COUTU, NICHOLAS

Address: 4021 SOUTHWEST 6 AVENUE Address: 4021 SOUTHWEST 6 AVENUE

City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34471

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: COUTU, GEORGE Name: COUTU, GEORGE

 Name:
 Coold, George

 Address:
 4021 SW 6TH AVE.

 City-St-Zip:
 OCALA, FL 34474

 City-St-Zip:
 OCALA, FL 34471

Title: DST ( ) Delete Title: DST (X) Change ( ) Addition

 Name:
 COUTU, DOROTHEA
 Name:
 COUTU, DOROTHEA

 Address:
 4021 SW 6TH AVE.
 Address:
 4021 SW 6TH AVE.

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 OCALA, FL 34471

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: DOROTHEA COUTU DST 06/15/2009