

FILE NOW: FILING FEE IS \$61.25

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Feb 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 767177 (9)
1. Corporation Name
COUNTRY OAKS PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business 4541 SW 46TH ST OCALA FL 34474-4354 US	Mailing Address 4541 SW 46TH ST OCALA FL 34474-4354 US
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2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 02/24/1983	4. FEI Number 59-3099994	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	
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		

9. Name and Address of Current Registered Agent FRAZIER, MILTON 4541 SW 46TH ST OCALA FL 34474
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL

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

12. OFFICERS AND DIRECTORS	
TITLE	PD LAWRENCE, BILL 4420 S.W. 44TH LANE OCALA FL
NAME	VD HARTZ, JAY 4451 S.W. 44TH LANE OCALA FL
STREET ADDRESS	SD SILEZIN, JOANN 4550 S.W. 44TH COURT OCALA FL
CITY - ST - ZIP	TD HARDBOWER, SANDRA 4471 S.W. 44TH LANE OCALA FL
TITLE	☐ DELETE
NAME	☐ DELETE
STREET ADDRESS	☐ DELETE
CITY - ST - ZIP	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD Milton Frazier 4561 SW 46th Street Ocala, FL 34474-4354
1.2 NAME	VD Bruce Moore 4540 SW 46th Avenue Ocala, FL 34474-4347
1.3 STREET ADDRESS	SD Ruth Martin 4571 SW 46th Avenue Ocala, FL 34474-4348
1.4 CITY - ST - ZIP	TD Elizabeth Hetrick 4581 SW 44th Lane Ocala, FL 34474-9221
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	☒ Change ☐ Addition
2.3 STREET ADDRESS	☒ Change ☐ Addition
2.4 CITY - ST - ZIP	☒ Change ☐ Addition
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	☐ Change ☐ Addition
3.3 STREET ADDRESS	☐ Change ☐ Addition
3.4 CITY - ST - ZIP	☐ Change ☐ Addition
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	☐ Change ☐ Addition
4.3 STREET ADDRESS	☐ Change ☐ Addition
4.4 CITY - ST - ZIP	☐ Change ☐ Addition
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	☐ Change ☐ Addition
5.3 STREET ADDRESS	☐ Change ☐ Addition
5.4 CITY - ST - ZIP	☐ Change ☐ Addition
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	☐ Change ☐ Addition
6.3 STREET ADDRESS	☐ Change ☐ Addition
6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I 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: MILTON FRAZIER, PRESIDENT 2/9/98 (352) 237-4506

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