2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# 769500

Entity Name: ANCIENT OAKS R.V. RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6407 SE US 441
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

Current Mailing Address:

6407 SE US 441
OKEECHOBEE, FL 34974 US

New Mailing Address:

FEI Number: 59-2392896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZOBEL, RON
6407 HWY 441 SE
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: CREECH, HOMER
Address: 5235 SE 64TH AV
City-St-Zip: OKEECHOBEE, FL 34974

Title: T ( ) Delete
Name: GUINDON, LINDA
Address: 5472 SE 67TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: S ( ) Delete
Name: COCHRAN, EZRA
Address: 6664 SE 55TH ST
City-St-Zip: OKEECHOBEE, FL 34974

Title: VP ( ) Delete
Name: ZOBEL, RON
Address: 6672 SE 56 ST.
City-St-Zip: OKECHOBEE, FL 34974

Title: P ( ) Delete
Name: PULLEN, EDWARD
Address: 6431 SE 51ST ST.
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: SAPP, LINDA
Address: 647 NE 96 AVE.
City-St-Zip: OKEECHOBEE, FL 34974

Title: S (X) Change ( ) Addition
Name: GREEN, PERRY
Address: 5321 SE 64TH AVE.
City-St-Zip: OKEECHOBEE, FL 34974

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RON ZOBEL VP 04/10/2008
Electronic Signature of Signing Officer or Director Date