



PR-21-2008 02:33 FROM:HANS W TEWS

407-423-8131

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT****FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90151 030 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
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| <b>DOCUMENT # N00000003101</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |                                                                                     |                                                                             |                                                 |                                                                   |
| 1. Entity Name<br>ORLANDO COUNTRY CLUB OAKS HOMEOWNERS ASSOCIATION, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
| Principal Place of Business<br>1350 ORANGE AVE - STE. 100<br>WINTER PARK, FL 32789-4932                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           |                                                                                     | Mailing Address<br>1350 ORANGE AVE - STE. 100<br>WINTER PARK, FL 32789-4932 |                                                                                                                                  |                                                                   |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |                                                                                     | 3. Mailing Address                                                          |                                                                                                                                  |                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                           |                                                                                     | Suite, Apt. #, etc.                                                         |                                                                                                                                  |                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                           |                                                                                     | City & State                                                                |                                                                                                                                  |                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                           | Country                                                                             |                                                                             | Zip                                                                                                                              |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
| 6. Name and Address of Current Registered Agent<br><br>GASPERONI & FLETCHER PA<br>158 S CHARLES RICHARD BEALL BLVD., STE. 2<br>DEBARY, FL 32713                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                                                                     |                                                                             | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code |                                                                   |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when withdrawing)</small> DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
| Filing Fee is \$61.25<br>Due by May 1, 2008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                             | \$5.00 May Be<br>Added to Fees                                                                                                   |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                               |                                                                             |                                                                                                                                  |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | DP                        | <input type="checkbox"/> Delete                                                     |                                                                             | TITLE                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | TEWS, HANS                |                                                                                     |                                                                             | NAME                                                                                                                             |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1238 COUNTRY CLUB OAKS DR |                                                                                     |                                                                             | STREET ADDRESS                                                                                                                   |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ORLANDO, FL 32804         |                                                                                     |                                                                             | CITY-ST-ZIP                                                                                                                      |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | DV                        | <input type="checkbox"/> Delete                                                     |                                                                             | TITLE                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | HOLCOMB, ALLEN            |                                                                                     |                                                                             | NAME                                                                                                                             |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1322 COUNTRY CLUB OAKS DR |                                                                                     |                                                                             | STREET ADDRESS                                                                                                                   |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ORLANDO, FL 32804         |                                                                                     |                                                                             | CITY-ST-ZIP                                                                                                                      |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | DST                       | <input type="checkbox"/> Delete                                                     |                                                                             | TITLE                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | SPRAGGINS, MICHAEL        |                                                                                     |                                                                             | NAME                                                                                                                             |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1325 COUNTRY CLUB OAKS DR |                                                                                     |                                                                             | STREET ADDRESS                                                                                                                   |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ORLANDO, FL 32804         |                                                                                     |                                                                             | CITY-ST-ZIP                                                                                                                      |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | D                         | <input type="checkbox"/> Delete                                                     |                                                                             | TITLE                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MELTON, ROBERT            |                                                                                     |                                                                             | NAME                                                                                                                             |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1223 COUNTRY CLUB OAKS DR |                                                                                     |                                                                             | STREET ADDRESS                                                                                                                   |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ORLANDO, FL 32804         |                                                                                     |                                                                             | CITY-ST-ZIP                                                                                                                      |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | D                         | <input type="checkbox"/> Delete                                                     |                                                                             | TITLE                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | HIRSCHY, ROGER            |                                                                                     |                                                                             | NAME                                                                                                                             |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1260 COUNTRY CLUB OAKS DR |                                                                                     |                                                                             | STREET ADDRESS                                                                                                                   |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ORLANDO, FL 32804         |                                                                                     |                                                                             | CITY-ST-ZIP                                                                                                                      |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           | <input type="checkbox"/> Delete                                                     |                                                                             | TITLE                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           |                                                                                     |                                                                             | NAME                                                                                                                             |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |                                                                                     |                                                                             | STREET ADDRESS                                                                                                                   |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           |                                                                                     |                                                                             | CITY-ST-ZIP                                                                                                                      |                                                                   |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address. With all other like empowered. |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
| SIGNATURE: <u>Hans W. Tews</u> 4/21/08 407-843-0210                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |
| SIGNATURE AND TYPED OR PRINTED NAME OF RECORDING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           |                                                                                     |                                                                             |                                                                                                                                  |                                                                   |