2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 17, 2009
Secretary of State

DOCUMENT# N00000003101

Entity Name: ORLANDO COUNTRY CLUB OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

385 DOUGLAS AVE, STE 3000
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

1801 COOK AVE
ORLANDO, FL 32806 US

Current Mailing Address:

385 DOUGLAS AVE, STE 3000
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

1801 COOK AVE
ORLANDO, FL 32806 US

FEI Number: 59-3649937 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LARSEN & ASSOCIATES PA
300 S ORANGE AVE
STE 1200
ORLANDO, FL 32801 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: DP ( ) Delete
Name: TEWS, HANS
Address: 1236 COUNTRY CLUB OAKS DR
City-St-Zip: ORLANDO, FL 32804

Title: DV ( ) Delete
Name: HOLCOMB, ALLEN
Address: 1322 COUNTRY CLUB OAKS DR
City-St-Zip: ORLANDO, FL 32804

Title: DST ( ) Delete
Name: SPRAGGINS, MICHAEL
Address: 1325 COUNTRY CLUB OAKS DR
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete
Name: MELTON, ROBERT
Address: 1223 COUNTRY CLUB OAKS DR
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete
Name: HIRSCHY, ROGER
Address: 1260 COUNTRY CLUB OAKS DR
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: HANS TEWS DP 08/17/2009
Electronic Signature of Signing Officer or Director — Date