2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003558

FILED Jan 28, 2005 Secretary of State

Entity Name: OAKMONT HOMEOWNERS ASSOCIATION OF TALLAHASSEE, INC.

Current P	rincipal Place	of Business:	New Prince	ipal Place of Business:	
003 HAYS FALLAHAS	STREET SSEE, FL 3230	11			
Current M	lailing Address	s:	New Maili	ng Address:	
003 HAYS FALLAHAS	STREET SSEE, FL 3230	1			
El Number	: 59-3663157	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
03 HAYS	N, JAMES STREET SSEE, FL 3230	1 US			
	e named entity s e of Florida.	ubmits this statement for th	e purpose of changing i	its registered office or registered agent, or b	ooth,
	e of Florida.	ubmits this statement for th	e purpose of changing i	its registered office or registered agent, or t	ooth,
n the State	e of Florida. RE:	ubmits this statement for thickness that the state of Registered and signature of Registered and States		ts registered office or registered agent, or t Date	ooth,
n the State	e of Florida. RE:	ic Signature of Registered	Agent		
n the State	e of Florida. RE: Electroni S AND DIRECT	ic Signature of Registered / FORS: Delete IES E	Agent	Date	
n the State BIGNATUI DFFICER: Title: Jame: Address:	e of Florida. RE: Electroni S AND DIRECT PD () HAMPSON, JAM 903 HAYS STRE TALLAHASSEE,	ic Signature of Registered A FORS: Delete IES E IET FL 32301 Delete Y IET	Agent ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIREC	
n the State BIGNATUI DFFICER Title: lame: lame: lame: lame: lame: lame: lame:	e of Florida. RE: Electroni S AND DIRECT PD () HAMPSON, JAM 903 HAYS STRE TALLAHASSEE, TD () TRAMMELL, KA' 907 HAYS STRE TALLAHASSEE,	TORS: Delete EES E EET FL 32301 Delete Y EET FL 32301 Delete FORD EET	Agent ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIREC () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KAY TRAMMELL TD 01/28/2005