

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003883

FILED
Apr 24, 2008
Secretary of State

Entity Name: OXFORD MOOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

882 JACKSON AVE
WINTER PARK, FL 32789

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

882 JACKSON AVE
WINTER PARK, FL 32789

FEI Number: 59-3658987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JORDAN, BRETT M
882 JACKSON AVE
WINTER PARK, FL 32789 US

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: BRETT M. JORDAN

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RECANATI, NICK
Address: 5830 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: VPD () Delete
Name: SECHREST, TROY
Address: 5933 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: SD () Delete
Name: COLE, GLENN
Address: 5836 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: TD (X) Delete
Name: STUCKEY, CAROL
Address: 5746 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Delete
Name: WELBRGEN, HANS
Address: 5801 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STUCKEY, CAROL
Address: 5746 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: FERNANDEZ, MARGIE
Address: 5752 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: GOODWIN, DAN
Address: 5518 OXFORD MOOR BLVD
City-St-Zip: WINDERMERE, FL 34786

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: CAROL STUCKEY

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date