2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007310

FILED Jaņ 1<u>9, 2</u>009 Secretary of State

Entity Name: THE RESERVE AT OAK RIDGE PROPERTY ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2189 CLEVELAND STREET STE 225 CLEARWATER, FL 33765 **Current Mailing Address: New Mailing Address:** 2189 CLEVELAND STREET STE 225 CLEARWATER, FL 33765 FEI Number: 59-3729213 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: LEIGHTON, LENNARD A LEIGHTON, LENNARD A 2189 CLEVELAND STREET STE 255 2189 CLEVELAND STREET CLEARWATER, FL 33765 CLEARWATER, FL 33765 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: LENNARD A. LEIGHTON 01/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Change () Addition () Delete BLACKWELL, GARY L II Name: Name: 5720 CHIPPER DRIVE Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: BRIERLEY, CHRIS Name: Address: 1414 OAK MEADOW POINTE Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition DEMASO, MARIE Name: HUBBARD, CHRIS Name: 4668 JEWELL TERRACE Address: Address: 6039 GULFORD DRIVE City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: NEW PORT RICHEY, FL 34655 Title: TD () Delete Title: () Change () Addition Name: SINBALDI, PETE Name: 1419 OAK MEADOW POINTE Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 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: CHRIS BRIERLEY PD 01/19/2009