


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 18, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N00000008560</b> 1. Entity Name <b>OAKHURST HOMEOWNER'S ASSOCIATION, INC.</b>					
Principal Place of Business <b>1330 E. LANDSDOWNE AVE. ORANGE CITY FL 32763 US</b>			Mailing Address <b>1330 E. LANDSDOWNE AVE. ORANGE CITY FL 32763 US</b>		
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	Country	4. FEI Number <b>59-3700221</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>HAHN, LISA 620 TRENIA ANN LANE ORANGE CITY FL 32763</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small> <div style="text-align: right;"><small>DATE</small></div>					
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make Check Payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEC</b> <b>STUEDLE, DEBBY SEC</b> <b>610 TRENIA ANN LANE</b> <b>ORANGE CITY FL 32763</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> <b>U000000306896</b>  <b>05/05/08-80016-020 61.25</b> </div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>HAHN, LISA</b> <b>620 TRENIA ANN LANE</b> <b>ORANGE CITY FL 32763</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRES</b> <b>CAPELLI, BOB</b> <b>1330 E LANDSTONE</b> <b>ORANGE CITY FL 32763</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIR</b> <b>STRUDLE, RON</b> <b>110 TRENIA ANN LANE</b> <b>ORANGE CITY FL 32763</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIR</b> <b>BROWN, JEROME DIR</b> <b>655 CENTRAL AVENUE</b> <b>ORANGE CITY FL 32763</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:**

*Lisa Beth Hahn* **LISA BETH HAHN** 4-16-08 3867891440