

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008560

FILED
Jan 10, 2009
Secretary of State

Entity Name: OAKHURST HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1330 E. LANDSDOWNE AVE.
ORANGE CITY, FL 32763 US

New Principal Place of Business:

Current Mailing Address:

1330 E. LANDSDOWNE AVE.
ORANGE CITY, FL 32763 US

New Mailing Address:

FEI Number: 59-3700221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAHN, LISA
620 TRENIA ANN LANE
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

CAPELLI, ROBERT C PRES
1330 E. LANDSDOWNE AVE
ORANGE CITY, FL 32763 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: ROBERT C CAPELLI

01/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SEC () Delete
Name: STUEDLE, DEBBY SEC
Address: 610 TRENIA ANN LANE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: T () Delete
Name: HAHN, LISA
Address: 620 TRENIA ANN LANE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: PRES () Delete
Name: CAPELLI, BOB
Address: 1330 E LANDSTONE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: DIR () Delete
Name: STRUDLE, RON
Address: 110 TRENIA ANN LANE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: DIR () Delete
Name: BROWN, JEROME DIR
Address: 655 CENTRAL AVENUE
City-St-Zip: ORANGE CITY, FL 32763 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: HALE, MARGIE SEC
Address: 615 TRENIA ANN LANE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: TRES (X) Change () Addition
Name: CIANCHETTI, MARK TRES
Address: 645 TRENIA ANN LANE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: PRES (X) Change () Addition
Name: CAPELLI, ROBERT C PRES
Address: 1330 E LANDSDOWNE AVE.
City-St-Zip: ORANGE CITY, FL 32763 US

Title: DIR (X) Change () Addition
Name: BLAIR, MIKE
Address: 640 TRENIA ANN LANE
City-St-Zip: ORANGE CITY, FL 32763 US

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: ROBERT C CAPELLI

PRES

01/10/2009

Electronic Signature of Signing Officer or Director

Date