

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001331

FILED
Feb 13, 2009
Secretary of State

Entity Name: OAKWOOD I AT GRANDE OAK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

27180 BAY LANDING DRIVE SUITE 4
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

27180 BAY LANDING DRIVE SUITE 4
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 65-1108604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERLING PROPERTY SERVICES
27180 BAY LANDING DRIVE SUITE 4
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOLYOM, DALE
Address: 20250 CALICE COURT #603
City-St-Zip: ESTERO, FL 33928

Title: TD () Delete
Name: BRIGGS, RON
Address: 20230 CALICO COURT #404
City-St-Zip: ESTERO, FL 33928

Title: S () Delete
Name: HARNDEN, JOE
Address: 20251 CALICE CT 2502
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOLYOM, DALE
Address: 20250 CALICE COURT #2604
City-St-Zip: ESTERO, FL 33928

Title: TSD (X) Change () Addition
Name: WILD, ELENA
Address: 20241 CALICE COURT # 2602
City-St-Zip: ESTERO, FL 33928

Title: VPD (X) Change () Addition
Name: HARNDEN, JOE
Address: 20251 CALICE CT # 2502
City-St-Zip: ESTERO, FL 33928

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: DALE SOLYOM

PD

02/13/2009

Electronic Signature of Signing Officer or Director

Date