

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 20, 2003 8:00 am
Secretary of State

05-20-2003 90270 001 ***367.50

DOCUMENT # N01000003681

1. Entity Name

OAKWOOD NEIGHBORHOOD AT GRAND OAKS ASSOCIATION, INC.



Principal Place of Business
**4902 EISENHOWER BOULEVARD
SUITE 380
TAMPA FL 33634**

Mailing Address
**4902 EISENHOWER BOULEVARD
SUITE 380
TAMPA FL 33634**

55042382



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3732057**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RAMPART PROPERTIES, INC.
10033 NINTH STREET NORTH
SECOND FLOOR
ST. PETERSBURG FL 33716**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **VALENTI, BETTY**
STREET ADDRESS **4902 EISENHOWER BLVD, SUITE 289**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **LEATHAM, RICHARD**
STREET ADDRESS **4902 EISENHOWER BLVD, SUITE 289**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE ☒ Change ☐ Addition
NAME **PAUL BECKERT**
STREET ADDRESS **4902 EISENHOWER BLVD SUITE 380**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE **D** ☒ Delete
NAME **GRANT, WILLIAM E**
STREET ADDRESS **4902 EISENHOWER BLVD, SUITE 289**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE ☒ Change ☐ Addition
NAME **MARK MATHANY**
STREET ADDRESS **4902 EISENHOWER BLVD. SUITE 100**
CITY-ST-ZIP **TAMPA, FL 33634**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **Betty Valenti** **RECEIVED. VALENTI** **4/17/03** **813 901-5263**

CR2E037 (10/02)