2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006638

FILED Apr 14, 2008 Secretary of State

Entity Name: LAKE OAKLAND HOME OWNERS ASSOCIATION INC.

urrent P	rincipal Place	of Business:	New Principal Plac	e of Business:
1025 SW ⁄IIAMI, FL				
urrent N	lailing Addres	s:	New Mailing Addre	ss:
1025 SW IIAMI, FL				
El Number	: 65-1147371	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
HUTTON, 1025 SW MAMI, FL	119TH ST			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
n the State	e of Florida.	submits this statement for the place is submits this statement for the place is submits the statement for the place is submits the statement for the place is submits the place i		ed office or registered agent, or both, Date
n the State	e of Florida.	ic Signature of Registered Ag	ent	
n the State	e of Florida. RE: Electron S AND DIREC	ic Signature of Registered Ag FORS: Delete IIE TH ST	ent	Date
n the State SIGNATUI DFFICER: itle: ame: ddress:	e of Florida. RE: Electron S AND DIREC TD () HUTTON, BONN 11025 SW 1191 MIAMI, FL 3317	ic Signature of Registered Ag FORS: Delete IIE IH ST 76 Delete I	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
n the State CIGNATUI CIFFICER CITE CIT	e of Florida. RE: Electron S AND DIREC TD () HUTTON, BONN 11025 SW 1197 MIAMI, FL 3317 PD () LANNON, KEVIN 11726 SW 108 MIAMI, FL 3317	ic Signature of Registered Ag FORS: Delete IIE TH ST 76 Delete N CT 76 Delete TH ST	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition

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: BONNIE HUTTON TD 04/14/2008