

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004299

FILED
May 05, 2009
Secretary of State

Entity Name: ASSOCIATION OF OAKBRIDGE HOMEOWNERS, INC.

Current Principal Place of Business:

2531 S.W. CAMEO BLVD.
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 12812
FORT PIERCE, FL 34979

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CASALINO, GREGG M ESQ
3111 CARDINAL DRIVE
VERO BEACH, FL 32963 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: P () Delete
Name: GAPINSKI, GARY M
Address: 2531 S.W. CAMEO BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP () Delete
Name: CURRY, WARREN
Address: 8505 LAKELAND BLVD.
City-St-Zip: FORT PIERCE, FL 34951

Title: ST () Delete
Name: GRAZIANO, MARIE
Address: 1352 BONEFISH COURT
City-St-Zip: FORT PIERCE, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY M. GAPINSKI

P

05/05/2009

Electronic Signature of Signing Officer or Director

_____ Date