

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006838

FILED
Apr 15, 2009
Secretary of State

Entity Name: WHITE OAK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11475 NW 74 TERRACE
ALACHUA, FL 32615 US

New Principal Place of Business:

Current Mailing Address:

766 TURKEY CREEK
ALACHUA, FL 32615 US

New Mailing Address:

FEI Number: 01-0818600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPADA GROUP USA, INC.
11475 NW 74 TERRACE
ALACHUA, FL 32615 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: PRES () Delete
Name: ULBING, SAM
Address: 7359 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615 US

Title: VP () Delete
Name: WILLIAMS, ED
Address: 7608 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

Title: T () Delete
Name: PIREU, JEFF
Address: 7373 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

Title: S () Delete
Name: KARAS, BRANDON
Address: 7401 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PIREU, JEFF
Address: 7373 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615 US

Title: VP (X) Change () Addition
Name: ELLIOT, MELISSA
Address: 7551 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

Title: T (X) Change () Addition
Name: CLARIZIO, ANTHONY
Address: 7745 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

Title: S (X) Change () Addition
Name: ULBING, SAM
Address: 7259 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

Title: D () Change (X) Addition
Name: LITTEL, CHARLES
Address: 7325 WHITE OAK RD.
City-St-Zip: ALACHUA, FL 32615

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: JEFF PIREU

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date