

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009116

FILED
Apr 28, 2009
Secretary of State

Entity Name: OAK PARK VILLAS OF BREVARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3600 DAIRY ROAD
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

3600 DAIRY ROAD
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 03-0550934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUGHES, LOIS
3600 DAIRY ROAD
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

WALCOTT, LUCILLE
3600 DAIRY ROAD
TITUSVILLE, FL 32796 US

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: LUCILLE WALCOTT

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: RYAN, KATHY
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

Title: PD () Delete
Name: WALCOTT, LUCILLE
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

Title: SD () Delete
Name: KING, DENISE
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

Title: TD () Delete
Name: HUGHES, LOIS
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: RYAN, KATHY
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

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

Title: TD (X) Change () Addition
Name: KASTANIAS, MELISSA
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

Title: DIRE (X) Change () Addition
Name: HUGHES, LOIS
Address: 3600 DAIRY RD
City-St-Zip: TITUSVILLE, FL 32796

Title: VP () Change (X) Addition
Name: VACANT, VACANT
Address: 3600 DAIRY ROAD
City-St-Zip: TITUSVILLE, FL 32796

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: MELISSA KASTANIAS

TD

04/28/2009

Electronic Signature of Signing Officer or Director

Date