

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010498

FILED
Feb 01, 2011
Secretary of State

Entity Name: OAK POINTE BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

880 AIRPORT RD
SUITE 108
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

880 AIRPORT RD
SUITE 108
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 20-0449446 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NEWSLOW, JAMES A III
880 AIRPORT RD
SUITE 108
ORMOND BEACH, FL 32174 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: PD
Name: NEWSLOW, JAMES A III
Address: 880 AIRPORT RD STE 108
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VD
Name: BARRETTE, GUY
Address: 880 AIRPORT RD., STE 109
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D
Name: RUSSELL, ANGUS C
Address: 880 AIRPORT RD., STE 108
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: T
Name: GARVEY, HEATHER N
Address: 880 AIRPORT RD STE #108
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: S
Name: CLEARWATER, KARIE S
Address: 880 AIRPORT RD STE 108
City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby 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 all other like empowered.

SIGNATURE: KARIE S. CLEARWATER

S

02/01/2011

Electronic Signature of Signing Officer or Director

Date