2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007
Secretary of State

DOCUMENT# N03362

Entity Name: SOUTHFORK OAKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2300 SW 43 ST.
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

2300 SW 43 ST.
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 59-2581619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

D. JEFFREY SAUSAMAN
C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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: DS ( ) Delete
Name: ROBERTS, RICK
Address: 2300 SW 43 ST G2
City-St-Zip: GAINESVILLE, FL 32607

Title: PD ( ) Delete
Name: LONDRIE, ANGEL
Address: 2300 SW 43ST I4
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: WEINBERGER, JOANNA
Address: 1236 HOLMSDALE RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete
Name: BLACKBURN, BRYAN
Address: 2300 SW 43RD ST M1
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: PRIVETTE, ALLISON
Address: 2300 SW 43RD STR O3
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ROBERTS, RICK
Address: 2300 SW 43 ST G2
City-St-Zip: GAINESVILLE, FL 32607

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

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

Title: DS (X) Change ( ) Addition
Name: HUYNH, MY CHI
Address: 2300 SW 43RD ST B3
City-St-Zip: GAINESVILLE, FL 32607

Title: D (X) Change ( ) Addition
Name: WOAN, CHRIS
Address: 2300 SW 43RD STR L2
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGEL LONDRIE P 04/04/2007

Electronic Signature of Signing Officer or Director — Date