

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03961

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** OAKWOOD VILLAS II MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

957 SONESTA AVE NE  
PALM BAY, FL 32905 US

**New Principal Place of Business:**

**Current Mailing Address:**

957 SONESTA AVE NE  
PALM BAY, FL 32905 US

**New Mailing Address:**

**FEI Number:** 65-0042320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RICHEY, JAMES  
957 SONESTA AVE  
PALM BAY, FL 32905 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: DV  
Name: WALLER, SUE  
Address: 957 SONESTA AVENUE  
City-St-Zip: PALM BAY, FL 32905

Title: SD  
Name: RANDELL, SHIRLEY  
Address: 957 SONESTA AVENUE  
City-St-Zip: PALM BAY, FL 32905

Title: TD  
Name: RICHEY, JAMES  
Address: 957 SONESTA AVE NE  
City-St-Zip: PALM BAY, FL 32905

Title: P  
Name: GILBERT, BRUCE  
Address: 957 SONESTA AVENUE  
City-St-Zip: PALM BAY, FL 32905

Title: D  
Name: RUBY, CHUCK  
Address: 957 SONESTA AVE NE  
City-St-Zip: PALM BAY, FL 32905

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: JAMES RICHEY

TREA

01/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date