

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2009
Secretary of State**

DOCUMENT# N04000005301

Entity Name: OAK FOREST AT MELBOURNE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1978 US 1
106
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1978 US 1
106
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 20-3050890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADVANCED PROPERTY MANAGEMENT OF CENTRAL FL
1978 US 1
106
ROCKLEDGE, FL 32955 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: DUVAL, ROBERT
Address: 1978 US 1 SUITE 106
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP () Delete
Name: OCASIO, EDGAR
Address: 1978 US 1 SUITE 106
City-St-Zip: ROCKLEDGE, FL 32955

Title: TREA () Delete
Name: LEIN, HAROLD
Address: 1978 US 1 SUITE 106
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUVAL, ROBERT
Address: 1978 US 1 SUITE 106
City-St-Zip: ROCKLEDGE, FL 32955

Title: VPD (X) Change () Addition
Name: OCASIO, EDGAR
Address: 1978 US 1 SUITE 106
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD (X) Change () Addition
Name: LEIN, HAROLD
Address: 1978 US 1 SUITE 106
City-St-Zip: ROCKLEDGE, FL 32955

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: VAN MOORE

Electronic Signature of Signing Officer or Director

RA

04/30/2009

Date