## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000007834

FILED Jun 09, 2009 Secretary of State

Entity Name: OAKWOOD AT LIVE OAK PRESERVE ASSOCIATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 20653 LONGLEAF PINE AVE TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 20653 LONGLEAF PINE AVE TAMPA, FL 33647 FEI Number: 20-2614657 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALLARMAN, KURT 20653 LONGLEAF PINE AVE TAMPA, FL 33647 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CALLARMAN, KURT Name: Name: Address: 20653 LONGLEAF PINE AVE Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: () Delete Title: () Change () Addition CAMPBELL, EILEEN Name: Name: Address: 20645 LONGLEAF PINE AVE Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip:

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: KURT CALLARMAN PRES 06/09/2009