2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2008 8:00 am Secretary of State 03-10-2008 90073 035 ****61.25

DOCUMENT # N05000003140

1. Entity Name OAK CROSSING NORTH HOMEOWNERS ASSOCIATION, INC.



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Principal Plac	e of Business	Mailing Address	***		40042340		
2000 E. EDG	SEWOOD DRIVE, STE. 103	3361 W. VINE ST	REET, #208				
LAKELAND, F	FL 33803	KISSIMMEE, FL. (34741		* *		
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		···					
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	. u o/.	and			
102 Park Place Blvd		102 Park Place Blid					
Suite, Apt.	#, etc.	Suite, Apt. #, et	c.		01222008 Chg-NP	CR2E037 (12/06)	
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Leity & State	mmee, FL	Kissimn	DE El		4. Æl Number 20-3327674	<u> </u>	oplied For
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3474	11 PSCADIA	マンクリ	Biceo	h	Certificate of Status Desired	5 \$8.75 Add	ditional d
<i></i>	6. Name and Address of Current F	Registered Agent	- Dece	101	7. Name and Address of New		
Na				ne	77 114110 6110 71441140	- Noglotorea Agent	
	ASSOCIATION MANAGEMENT	Γ, INC.					•
C/O DOLL			Stre	et Address	30. Box Number is Not Accepta	12/VV	
3361 W. VINE STREET, SUITE 208 KISSIMMEE, FL 34741				Uac I	MA TIPES	<u> </u>	
KIOOHVIE	E, FL 34/41			DUIT	2 D-2		
			City	Kî-ee	immee.	FL ZigCod	341
8. The above	named entity submits this statement for	the purpose of chang	ing its registered offic	e or register	ed agent, or both, in the State of	Florida. Lam familiar with	and accept
the obligat	ions of registered agent.		, ,,			1 ,	and dooopt
	1/100	\leq $/$			•		_
SIGNATURE VELLE DA . Namt 2/19/08							
	Signature, typed or printed name of registered agent a	nd title it applicable.	(NOTE: Registered Agent s	ignature required	when reinstating)	DATE	
	Filing Fee is \$61.25		on Campaign Financir		\$5.00 May Be	Make check payable to	0
		I found	Fund Contribution	1 1		larida Danadmarii af Si	
	Due by May 1, 2008		Fund Contribution.	<u> </u>	Added to Fees FI	lorida Department of S	tate
10.	OFFICERS AND DIR		Fund Contribution.		Added to Fees FI		
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indicated on this report of supply-mental report is true and accurage and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the recorder or trustee empowered to executelyhis report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: