

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90785 001 ***630.00

DOCUMENT # N05000003888

1. Entity Name
OAK THORN AT LIVE OAK PRESERVE ASSOCIATION, INC.



Principal Place of Business
**3300 UNIVERSITY DR
CORAL SPRINGS, FL 33065**

Mailing Address
**3300 UNIVERSITY DR
CORAL SPRINGS, FL 33065**

66013418



2. Principal Place of Business

11500 Old Tampa Bay Dr

Suite, Apt. #, etc

3. Mailing Address

11500 Old Tampa Bay Dr

Suite, Apt. #, etc

04172006 Chg-NP CR2E037 (11/05)

City & State

San Antonio, FL

City & State

San Antonio, FL

4. FEI Number

20-2691233

Applied For

Not Applicable

Zip

33576

Country

Zip

33576

Country

5. Certificate of Status Desired

☒ XX

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GERSON, GARY N ESQ
1645 PALM BEACH LAKES BLVD SUITE 1200
WEST PALM BEACH, FL 33401**

7. Name and Address of New Registered Agent

Name

Jonnie R. Tyler

Street Address (P.O. Box Number is Not Acceptable)

11500 Old Tampa Bay Dr

City

San Antonio

FL

Zip Code
33576

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-24-06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
Robert D Krieff
11500 Old Tampa Bay Dr
San Antonio, FL 33576

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
VP
Lauren Arcaro
11500 Old Tampa Bay Dr
San Antonio, FL 33576

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
T
Ron Forrest
11500 Old Tampa Bay Dr
San Antonio, FL 33576

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all one like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06

Date

352-588-2100

Daytime Phone #