

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005936

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** OAK PATH SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15955 NORTH FLORIDA AVENUE  
SUITE 101  
LUTZ, FL 33549

**New Principal Place of Business:**

P.O BOX 2553  
LUTZ, FL 33548

**Current Mailing Address:**

15955 NORTH FLORIDA AVENUE  
SUITE 101  
LUTZ, FL 33549

**New Mailing Address:**

18514 HANNAH MICHAELA LANE  
LUTZ, FL 33549

**FEI Number:** 27-2009161

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DARREY, JEFF. JR.  
15955 NORTH FLORIDA AVENUE  
SUITE 101  
LUTZ, FL 33549 US

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

MURPHY, DIONNE  
18514 HANNAH MICHAELA LANE  
LUTZ, FL 33549 US

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: DIONNE MURPHY

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MCNUTT, GREGORY R  
Address: 18515 HANNAH MICHAELA LANE  
City-St-Zip: LUTZ, FL 33549

Title: DS  
Name: MURPHY, DIONNE  
Address: 18514 HANNAH MICHAELA LANE  
City-St-Zip: LUTZ, FL 33549

Title: DT  
Name: POE, GUOCHING  
Address: 18517 HANNAH MICHAELA LANE  
City-St-Zip: LUTZ, FL 33549

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: DIONNE MURPHY

SEC

02/28/2011

Electronic Signature of Signing Officer or Director

Date