

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009060

FILED
Jun 13, 2008
Secretary of State

Entity Name: EMERALD OAKS AT NORTH PORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13355-C TAMIAMI TRAIL
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

13355-C TAMIAMI TRAIL
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

SHUTE, FRED
13355-C TAMIAMI TRAIL
NORTH PORT, FL 34287 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: HITCH, PETER
Address: 13355-C TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287

Title: ST () Delete
Name: SHUTE, FRED
Address: 13355-C TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287

Title: V (X) Delete
Name: HORNIG, JAMES
Address: 13355-C TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: POTTS, GREGORY V
Address: 13355-C TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: GREGORY V. POTTS

PRES

06/13/2008

Electronic Signature of Signing Officer or Director

Date