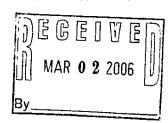
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 08, 2006 8:00 am Secretary of State 02-16-2006 90031 031 ****61.25

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DOCUMENT # N05000010745					02-10-20	00 20031 031	01.23
THE PRESERVE AT OAKLEAF PLANTATION CONDOMINIUM ASSOCIATION, INC.							
Principal Place of Business 11217 SAN JOSE BLVD JACKSONVILLE-FL 32223		Mailing Address 11217 SAN JOSE BLVD JACKSONVILLE, FL 32223			66004133		
2. Principal P	face of Business	3. Mailing Address				III) GULUI KINII NAMII HALIA DIBRI U	KELLI DJ (1881)
Suite, Apt. #. etc.		Suite, Apt. #, etc.			01312006 Chg-NP	CR2E037 (11/05)	
City & State		City & State		4. FEI Number	ه کا الا	oplied For ot Applicable	
Zip	Country	Zíp	Coun	itry	5. Certificate of Status Desired	See Require	
5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name							
F&L CORP				Street Address (P.O. Box Number is Not Acceptable)			
1 INDEPENDENT DR SUITE 1300 JACKSONVILLE, FL 32202			-		MAY MAJAGE		
L				5455	LS HWY	AIA SOUTI	
					UG USTINE	FL Zip Coo	280
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.							
Matrix It Will a word a later							
SIGNATURE Signature fixed or printed name of registered agent and title applicable. (NOTE: Registered Agent eignature required when reinstalting) OATE OATE							
10.	OFFICERS AND D	RECTORS .	11.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN	i : : : : : : : : : : : : : : : : : : :
TITLE NAME	PD ARNOLD, CHARLES W	☐ Delete	TITLE			☐ Champe	☐ Addition
STREET ADDRESS	11217 SAN JOSE BLVD JACKSONVILLE, FL 32223			ADDRESS IT-ZIP		,	·
TITLE	VO	☐ Defets	IINE			Change	Addition
NAME STREET ACCRESS	UDELL, ROBERT E 11217 SAN JOSE BLVD		NAME STREET	ADDRESS			1
CITY-ST-ZP			CITY-S				
TITLE	STD JOHNSON, SUSAN	☐ Deleis	TITLE			☐ Change	Addition
STREET ACORESS	11217 SAN JOSE BLVD			ADDRESS	- ·	•	· · · . }
CITY-ST-ZIP	JACKSONVILLE, FL 32223		CITY-S	T-ZIP			
TITLE		Délpiq	NAME			Change	Addition)
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пте		☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS			street	ADDRESS			}
CITY-ST-ZIP			CITY-\$	T-20°			
TITLE Name		. Defete	TITLE	-		☐ Change	Addition
STREET AOURESS			STREET	ADDRESS			- 1
CITY-ST-ZIP	math, shad the information 11 A 10	a de la filia de la companya de la c	CITY-51		in Chasta 110 Finale State	harbas aprilis about 10-1	100000
12. I hereby certify that the information supplied with this filting 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 effoct as if made under oath; that I am and efficer or director of the corporation or the receiper by flustee empowered to execute this report sylequired by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment sylipen address, with all other like importance of the corporation of the corporation of the receiper by the r							
SIGNATURE: SIGNATURE: SIGNATURE AND TYPED DA PRINTED NAME OF BIOMNO OFFICER OR DIRECTOR DISCOVER OR DIRECTOR DISCOVER DI							





February 20, 2006

THE PRESERVE AT OAKLEAF PLANTATION CONDOMINIUM ASSOCIAT 11217 SAN JOSE BLVD JACKSONVILLE, FL 32223

Subject: THE PRESERVE AT OAKLEAF PLANTATION CONDOMINIUM

Reference Number:

N05000010745

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION