

FILED
Aug 27, 2007 8:00 am
Secretary of State

07-23-2007 90035 027 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N05000012132			
1. Entity Name OAKLEAF PLANTATION PARCELS 8 & 9 HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 3020 HARTLEY ROAD SUITE 100 JACKSONVILLE, FL 32257		Mailing Address 3020 HARTLEY ROAD SUITE 100 JACKSONVILLE, FL 32257	
2. Principal Place of Business - No P.O. Box # 11217 San Jose Blvd		3. Mailing Address 11217 San Jose Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Jacksonville, FL		City & State Jacksonville, FL	
Zip 32223	Country	Zip 32223	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		4. FEI Number APPLIED FOR 26-0766063	
6. Name and Address of Current Registered Agent ROGERS, ZENZI 3020 HARTLEY ROAD SUITE 100 JACKSONVILLE, FL 32257		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 11217 San Jose Blvd City Jacksonville FL Zip Code 32223	
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 <u>Zenzi Rogers</u> DATE <u>07-16-07</u> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)			
Filing Fee is \$61.25 Due by September 14, 2007		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROGERS, ZENZI 3020 HARTLEY ROAD JACKSONVILLE, FL 32257 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Audrey Masters 11217 San Jose Blvd Jacksonville, FL 32223 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTR HOYLE, RANDALL 3020 HARTLEY ROAD JACKSONVILLE, FL 32257 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec/Treas Jay Spiegel 11217 San Jose Blvd Jacksonville, FL 32223 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BECKER, CARL 11217 SAN JOSE BLVD JACKSONVILLE, FL 32223 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 other like empowered. SIGNATURE: <u>Zenzi Rogers</u> DATE <u>07-16-07</u> DAYTIME PHONE # <u>904/237-1625</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			