

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007843

FILED
Feb 19, 2008
Secretary of State

Entity Name: OSBORNE OAKS UNIT II HOMEOWNERS ASSOC.

Current Principal Place of Business:

5220 S. LOIS AVE
TAMPA, FL 33611

New Principal Place of Business:

3819 OSBORNE OAKS WAY
TAMPA, FL 33610

Current Mailing Address:

5220 S. LOIS AVE
TAMPA, FL 33611

New Mailing Address:

3819 OSBORNE OAKS WAY
TAMPA, FL 33610

FEI Number: 20-5228890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COYLE, LYNDAR
5220 S. LOIS AVE
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

WELLS, CHARLES
3819 OSBORNE OAKS WAY
TAMPA, FL 33610 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: CHARLES WELLS

02/19/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: COYLE, LYNDAR PRES
Address: 5220 S. LOIS AVE
City-St-Zip: TAMPA, FL 33611 US

Title: VP () Delete
Name: MARTIN, ROBERT J V.P.
Address: 5220 S. LOIS AVE
City-St-Zip: TAMPA, FL 33611 US

Title: D () Delete
Name: CHEANEY-MARTIN, CAROL C D
Address: 5220 S. LOIS AVE
City-St-Zip: TAMPA, FL 33611 US

Title: D () Delete
Name: COYLE, JOSEPH G D
Address: 5220 S. LOIS AVE
City-St-Zip: TAMPA, FL 33611 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WELLS, CHARLES PRES
Address: 3819 OSBORNE OAKS WAY
City-St-Zip: TAMPA, FL 33610 US

Title: VP (X) Change () Addition
Name: THOMAS, LISA V.P.
Address: 3807 OSBORNE OAKS WAY
City-St-Zip: TAMPA, FL 33610 US

Title: D (X) Change () Addition
Name: EZEUGU, FRANKLEIN D
Address: 18936 WOODSAGE DR
City-St-Zip: TAMPA, FL 33647 US

Title: SEC (X) Change () Addition
Name: TOLBERT, DEMETRIOUS S
Address: 3803 OSBORNE OAKS WAY
City-St-Zip: TAMPA, FL 33610 US

Title: T () Change (X) Addition
Name: BIVEN, TANGELA T
Address: 3817 OSBORNE OAKS WAY
City-St-Zip: TAMPA, FL 33610

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: CHARLES WELLS

PRES

02/19/2008

Electronic Signature of Signing Officer or Director

Date