2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06947

FILED Apr 30, 2009 Secretary of State

Entity Name: OAK KNOLL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12745 N. 57TH ST TAMPA, FL 33617

Current Mailing Address: New Mailing Address:

12745 N 57TH ST TAMPA, FL 33617

FEI Number: 59-2894272 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 COLEY, DEWAN
 COLEY, DEE

 12723 N. 57TH ST,
 12723 N 57TH STREET

12/23 N. 5/TH ST, 12/23 N. 5/TH STREET TAMPA, FL 33617 US TAMPA, FL 33617 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: DEE COLEY 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: COLEY, DEWAN Name: COLEY, DEE

Address: 12723 N. 57TH ST. Address: 12723 N. 57TH ST. City-St-Zip: TAMPA, FL 33617 City-St-Zip: TAMPA, FL 33617

Title: V () Delete Title: V (X) Change () Addition Name: MERCER, LOIS Name: GARB, SONDRA

 Name:
 MERCER, LOIS
 Name:
 GARB, SONDRA

 Address:
 12725 N 57TH ST
 Address:
 12722 N 57TH ST

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 TAMPA, FL 33617

Title: T () Delete Title: T (X) Change () Addition

 Name:
 DUNCAN, CYRENA
 Name:
 CRONIN, LAUREL

 Address:
 12740 N 57TH ST
 Address:
 12752 N 57TH ST

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 TAMPA, FL 33617

Title: S () Delete Title: S () Change (X) Addition

 Name:
 Name:
 TEAL, MARY

 Address:
 Address:
 12715 N 57TH ST

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33617

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 WILLIAMS, PAT

 Address:
 Address:
 12732 N 57TH ST

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33617

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: DEE COLEY P 04/30/2009