

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003182

FILED
Apr 29, 2008
Secretary of State

Entity Name: UNIVERSITY OAKS HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

104 CYPRESS POINT EAST
PENSACOLA, FL 32514

New Principal Place of Business:

1722 GRADUATE WAY
PENSACOLA, FL 32514

Current Mailing Address:

104 CYPRESS POINT EAST
PENSACOLA, FL 32514

New Mailing Address:

1722 GRADUATE WAY
PENSACOLA, FL 32514

FEI Number: 41-2260571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGDON, C.R. IV
104 CYPRESS POINT EAST
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

WILLEY, DANIELLE V.P.
1722 GRADUATE WAY
PENSACOLA, FL 32514 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: DANIELLE J. WILEY

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: HIGDON, C.R. IV
Address: 104 CYPRESS POINT EAST
City-St-Zip: PENSACOLA, FL 32514

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILLEY, RYAN
Address: 1722 GRADUATE WAY
City-St-Zip: PENSACOLA, FL 32514

Title: VP () Change (X) Addition
Name: WILLEY, DANIELLE J
Address: 1722 GRADUATE WAY
City-St-Zip: PENSACOLA, FL 32514

Title: SEC () Change (X) Addition
Name: SPANIOLA, PATTI
Address: 1702 GRADUATE WAY
City-St-Zip: PENSACOLA, FL 32514

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: DANIELLE WILLEY

VP

04/29/2008

Electronic Signature of Signing Officer or Director

Date