## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007554

FILED Apr 08, 2009 Secretary of State

Entity Name: OXFORD TERRACE II CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 5290 HIATUS RD SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** C/O ACTION REAL ESTATE SERVICES 5290 HIATUS RD 6110-B NW 1ST PL SUNRISE, FL 33351 GAINESVILLE, FL 32607 FEI Number: 26-0744941 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: EISINGER, DENNIS J. ACTION REAL ESTATE SERVICES 4000 HOLLYWOOD BLVD., STE. 265 SOUTH 6110-N MW 1ST PL C/O EISINGER, BROWN, LEWIS & FRANKEL, P.A. GAINESVILLE, FL 32607 US HOLLYWOOD, FL 33021 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: D JEFFREY SAUSAMAN 04/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Change () Addition () Delete AKRA, JOSEPH P. Name: Name: 5290 HIATUS RD. Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: () Delete Title: () Change () Addition Name: EISINGER, DENNIS J. Name: Address: 4000 HOLLYWOOD BLVD., STE, 265-S Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: Title: DST () Delete Title: () Change () Addition DAVIS, JAMES R. Name: Name: Address: 5290 HIATUS RD. Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip:

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: DENNIS EISINGER P 04/08/2009