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Jan 22 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N07852 (9)

1. Corporation Name

OAKRIDGE MOBILE HOME ASSOCIATION, INC.



Principal Place of Business

Mailing Address

5210 N. SR 33  
LOT 70  
LAKELAND FL 33805  
US

5210 N. SR. 33 % CHARLES LELAND  
LOT 70  
LAKELAND FL 33805-9595  
US

3. Date Incorporated or Qualified  
02/26/1985

3a. Date of Last Report  
01/29/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LELAND, CHARLES  
5210 N. SR. 33 LOT 70  
LAKELAND FL 33805

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Charles Leland*  
Signature, typed or printed name of registered agent and title if applicable

CHARLES LELAND

(NOTE: Registered Agent signature required when reinstating)

DATE

1-14-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SULIER, EDWARD	
STREET ADDRESS	5210 N. SR 33 LOT 70	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CARTWRIGHT, JAMES	
STREET ADDRESS	5210 SR 33 N. #62	
CITY-ST-ZIP	LAKELAND FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	LELAND, CHARLES	
STREET ADDRESS	5210 N SR 33 #70	
CITY-ST-ZIP	LAKELAND FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	THOMPSON, SUE	
STREET ADDRESS	5210 SR 33 N #96	
CITY-ST-ZIP	LAKELAND FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	SHUE, BONNIE	
STREET ADDRESS	5210 SR 33 N #39	
CITY-ST-ZIP	LAKELAND FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	KESTERSON, JOHN	
STREET ADDRESS	5210 N. SR. 33 LOT 70	
CITY-ST-ZIP	LAKELAND FL	

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	ROBERT NADOW	
1.3 STREET ADDRESS	5210 N SR 33 lot 10	
1.4 CITY-ST-ZIP	LAKELAND, FL. 33805	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	HENRY PAGE	
5.3 STREET ADDRESS	5210 N SR 33 lot 77	
5.4 CITY-ST-ZIP	LAKELAND, FL. 33805	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Charles Leland* CHARLES LELAND 1-14-97 941 6831461

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0052806

CR2E037 (9/96)