2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 06, 2000 8:00 am Secretary of State DOCUMENT# 7NO 7852 1. Entity Name OAKRIDGE MOBILE HOME ASSOCIATION INC 03-06-2000 90127 046 \*\*\*\*61.75 Mailing Address Principal Place of Business 5210 N SR 33 5210 N SR 33 Lot 70 A0028105 LAKELAND, FL. 33805 Lakeland, Fl. 33805 2. Principal Place of Business 3. Mailing Address 521<u>0 N SR 33</u> <u>5210 N SR 33</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE <u> Lot 6**1**</u> Applied For 4. FEI Number City & State City & State Lakeland Fl. 33805 59-3173148 Not Applicable Lakeland Fl. 33805 Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required <u>33805</u> <u>33805</u> 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Henry Page Street Address (P.O. Box Number is Not Acceptable) 5210 N SR 33 Lot 62 Lakeland , F1. 33805 City Zip Code Fl 8. 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 Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change ☐ Addition ☐ Delete TITLE P/D Henry Page NAME STREET ADDRESS STREET ADDRESS 5210 N SR 33 1ot 672 CITY-ST-ZIP CITY-ST-ZIP Lakeland, Fl. 33805 ☐ Addition TITLE ☐ Change ☐ Delete TITLE V/D NAME NAME Sandra Turner 5210 N SR 33 lot 94 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP-Lakeland, F1: 33805 ☐ Change ☐ Addition ☐ Delete TITLE S/D NAME NAME Ruth Smith STREET ADDRESS STREET ADDRESS 5210 N Sr 33 lot 73 CITY-ST-ZIE CITY-ST-ZIP Lakeland , ☐ Change Addition TITLE ☐ Delete TITI E NAME Charles Leland 5210 N SR 33 Lot 70 STREET ADDRESS STREET ADDRESS Lakeland F1. 33805 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE Štanley Robar 5210 N SR 33 NAME STREET ADDRESS Lakeland F1 33805 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE **Bernice Rawlston** NAME NAME 5210 N Sr 33 lot 3 STREET ADDRESS STREET ADDRESS Lakeland F1 33805 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Henry Page P/D

SIGNATURE AND TYPED OR PRINTED

SIGNATURE: