

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 31, 2007
Secretary of State

DOCUMENT# N08223

Entity Name: CHRISTINA OAKS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1507 S ALEXANDER ST
STE 103
PLANT CITY, FL 33563 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 3566
PLANT CITY, FL 33563 US**New Mailing Address:****FEI Number:** 59-2569770**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PROFESSIONAL PROPERTY MGMT. SVC.
1507 S ALEXANDER ST
SUITE 103
PLANT CITY, FL 33563 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: GARCIA, THERESA
Address: 6205 THOUSAND OAKS DR.
City-St-Zip: LAKELAND, FL 33813**Title:** V () Delete
Name: SANFORD, ROY
Address: 719 BUTTERNUT PLACE
City-St-Zip: LAKELAND, FL 33813**Title:** S () Delete
Name: PETERSON, VALERIE
Address: 6311 BUTTERNUT DR
City-St-Zip: LAKELAND, FL 33813**Title:** T () Delete
Name: WEBB, BRANDON
Address: 6351 BEECHNUT DR
City-St-Zip: LAKELAND, FL 33813**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T (X) Change () Addition
Name: LITTLETON, WILLIAM
Address: 6340 BEECHNUT DR
City-St-Zip: LAKELAND, FL 33813

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: THERESA GARCIA

P

07/31/2007

Electronic Signature of Signing Officer or Director

Date