

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09679

FILED
Jul 07, 2008
Secretary of State

Entity Name: OVERLOOK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O LARRY K. ODEN
303 MONROE ST
HOLLYWOOD, FL 33019 US

New Principal Place of Business:

Current Mailing Address:

C/O LARRY K. ODEN
303 MONROE ST.
HOLLYWOOD, FL 33019 US

New Mailing Address:

C/O LARRY K. ODEN
303 MONROE ST
HOLLYWOOD, FL 33019 US

FEI Number: 65-0030941 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ODEN, LARRY K
303 MONROE ST
HOLLYWOOD, FL 33019 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: PDT () Delete
Name: ODEN, LARRY K
Address: 303 MONROE ST.
City-St-Zip: HOLLYWOOD, FL

Title: VPD () Delete
Name: ALEXANDER, FRANK
Address: 301 MONROE ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: SD () Delete
Name: ALEXANDER, LINDA
Address: 301 MONROE ST.
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: ODEN, LARRY K
Address: 303 MONROE ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: LARRY K. ODEN

PDT

07/07/2008

Electronic Signature of Signing Officer or Director

Date