

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90026 029 ****61.25

DOCUMENT # N13035

1. Entity Name

OAK HILLS UNIT 23 HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

5225 LYDIA CT.
SPRING HILL FL 34608
US

Mailing Address

P O BOX 6398
SPRING HILL FL 34611
US

2. Principal Place of Business

5225 Lydia Court

3. Mailing Address

Suite, Apt. #, etc.

City & State

Spring Hill FL

City & State

Zip 34608

Country USA

Zip

Country

4. FEI Number

59-2642157

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, LOUANNE
5225 LYDIA COURT
SPRING HILL FL 34608

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Louanne Martin, Treasurer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-7-05

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KASEY, CHARLES 5264 LYDIA COURT SPRING HILL FL 34608 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, LOUANNE 5225 LYDIA COURT SPRING HILL FL 34608 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COLBURN, KENNETH 5101 FLORENTINE CT. SPRING HILL FL 34608 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECKLER, EDWARD 5294 LYDIA COURT SPRING HILL FL 34608 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHEELER, PATRICIA 10220 SWANSON CT. SPRING HILL FL 34608 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V alan Mackley 5185 Keysville Spring Hill, FL 34608 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Colburn, Kenneth 5101 Florentine Ct Spring Hill, FL 34608 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Patricia Wheeler 10220 Swanson Ct Spring Hill, FL 34608 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I 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 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.

SIGNATURE:

Kenneth G. Colburn Kenneth G. Colburn 2-7-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

352-0867
0030