

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13545

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** OAKWOOD MANOR HOMEOWNERS ASSOCIATION OF SARASOTA, FLORIDA, INC.

**Current Principal Place of Business:**

3330 FRUITVILLE RD.  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

3330 FRUITVILLE RD.  
SARASOTA, FL 34237

**New Mailing Address:**

**FEI Number:** 65-0067494

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KORP, WILLIAM R  
C/O ABEL/BAND ATTORNEYS AT LAW  
240 S. PINEAPPLE AVE.  
SARASOTA, FL 34230 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: LEONHARD, WILLIAM  
Address: 3329 OAKWOOD BLVD. W  
City-St-Zip: SARASOTA, FL 34237

Title: T ( ) Delete  
Name: DAWES, FRANK  
Address: 3307 OAKWOOD BLVD S  
City-St-Zip: SARASOTA, FL 34237

Title: S ( ) Delete  
Name: KRAUS, NANCY  
Address: 3216 OAKWOOD BLVD S  
City-St-Zip: SARASOTA, FL 34237

Title: VP ( ) Delete  
Name: NACHAZEL, TOM  
Address: 303 WHITE OAK WAY  
City-St-Zip: SARASOTA, FL 34237

Title: D ( ) Delete  
Name: CHAREN, LOIS  
Address: 3340 SPANISH OAK TERR  
City-St-Zip: SARASOTA, FL 34237

Title: TD ( ) Delete  
Name: ORTH, HOWARD  
Address: 3404 OVER CUP OAK TERR  
City-St-Zip: SARASOTA, FL 34237

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LEONHARD, WILLIAM  
Address: 3408 OVER CUP OAK TERR.  
City-St-Zip: SARASOTA, FL 34237

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: ( ) 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: G. WILLIAM LEONHARD

P

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date