

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13905

FILED
May 08, 2006
Secretary of State

Entity Name: OAK KNOLL AT PINE ISLAND RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 290445
DAVIE, FL 33329

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 290445
DAVIE, FL 33329

New Mailing Address:

6915 TAFT STREET
HOLLYWOOD, FL 33024

FEI Number: 65-0000954 **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:

KNOX, CHRISTOPHER B
300 SOUTH PINE ISLAND ROAD
#210
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

SHAPIRO, PAUL
6915 TAFT STREET
HOLLYWOOD, FL 33024 US

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: PAUL SHAPIRO

05/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FASCIANI, VITALE
Address: 9850 N. OAK KNOLL CIR.
City-St-Zip: FT. LAUDERDALE, FL 33324

Title: DP () Delete
Name: KNOX, CHRISTOPHER B
Address: 1520 EAST OAK KNOLL CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: SD () Delete
Name: KAREM, BURNSIDE
Address: 1811 EAST OAK KNOLL CIR
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: D (X) Delete
Name: BERRY, ALICE
Address: 1610 EAST OAK KNOLL CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: INKLEBARGER, JAMES
Address: 2321 SW 98 TERR
City-St-Zip: FT LAUDERDALE, FL 33324

Title: DS (X) Change () Addition
Name: LOPEZ, ROBERT
Address: 2220 SW 97 RD
City-St-Zip: FT LAUDERDALE, FL 33324

Title: D (X) Change () Addition
Name: HESTER, JERRY
Address: 2210 SW 97 RD
City-St-Zip: FORT LAUDERDALE, FL 33324

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES INKLEBARGER

DP

05/08/2006

Electronic Signature of Signing Officer or Director

Date