

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13905

FILED
Jan 19, 2012
Secretary of State

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

Current Principal Place of Business:

1811 EAST OAK KNOLL CIRCLE
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

8930 STATE ROAD 84
BOX 254
DAVIE, FL 33324

New Mailing Address:

FEI Number: 65-0000954 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KNOX, CHRISTOPHER B
300 SOUTH PINE ISLAND ROAD
SUITE 210
PLANTATION, FL 33324 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: DP
Name: BURNSIDE, KAREN PRES. D
Address: 1811 EAST OAK KNOLL CIRCLE
City-St-Zip: DAVIE, FL 33324

Title: DS
Name: TUNDERVARY, JAN S VP. D
Address: 1541 WEST OAK KNOLL CIRCLE
City-St-Zip: DAVIE, FL 33324

Title: T D
Name: PUJOLS, JORGE TREAS.D
Address: 1960 WEST OAK KNOLL CIRCLE
City-St-Zip: DAVIE, FL 33324

Title: S D
Name: GOLDSTEIN, AMY SEC D
Address: 1750 EAST OAK KNOLL CIRCLE
City-St-Zip: DAVIE,, FL 33324

Title: D
Name: FERRARA, SUSAN D
Address: 9921 N. OAK KNOLL CIRCLE
City-St-Zip: DAVIE, FL 33324

I hereby 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 all other like empowered.

SIGNATURE: KAREN BURNSIDE

PRES

01/19/2012

Electronic Signature of Signing Officer or Director

Date