2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15346

FILED Mar 20, 2009 Secretary of State

Entity Name: OAKWOOD CONDOMINIUM ASSOCIATION, INC. OF CHARLOTTE COUNTY.

Current Principal Place of Business: New Principal Place of Business: 2275 S MCCALL RD ENGLEWOOD, FL 34224 US **Current Mailing Address: New Mailing Address:** 1460 S. MCCALL RD. 1460 S. MCCALL RD. SUITE 4-D SUITE 4-G ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 US FEI Number: 65-0122241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEST COAST PROPERTY MANAGEMENT, LLC WEST COAST PROPERTY MANAGEMENT, LLC 1460 S. MCCALL RD. 1460 S. MCCALL RD. SUITE 4-G SUITE 4-D ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 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: 03/20/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: OD/S () Delete () Change () Addition KIMBALL, NANCY ANN Name: Name: 2275 S MCCALL RD #104 Address: Address: City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: Title: Title: PD (X) Change () Addition () Delete MARTINS, CARLOS Name: MARTINS, CARLOS Name: Address: 8 WESTPOND CT Address: 8 WESTPOND CT City-St-Zip: SMITHTOWN, NY 11787 City-St-Zip: SMITHTOWN, NY 11787 Title: () Delete Title: (X) Change () Addition SMITH, MARGARET SMITH, MARGARET Name: Name: 1315 CHATSWORTH BLVD Address: 1315 CHATSWORTH BLVD Address: City-St-Zip: COOKEVILLE, TN 38502 City-St-Zip: COOKEVILLE, TN 38502 (X) Change () Addition Title: () Delete Title: D SHANK, JOHN Name: PREHN, JANET Name: Address: 2275 S MCCALL RD UINIT 106 Address: 25 HILLCREST DR City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: ENGLEWOOD, FL 34223 Title: Title: () Delete () Change () Addition SMITH, CHRISTOPHER Name: Name: 2275 S MCCALL ROAD #201 Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 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: NANCY ANN KIMBALL OD/S 03/20/2009