

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17184

FILED
May 03, 2010
Secretary of State

Entity Name: OXFORD OAKS ASSOCIATION, INC.

Current Principal Place of Business:

9673 BAYOU BLUFF DR.
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 57473
JACKSONVILLE, FL 32241 US

New Mailing Address:

FEI Number: 59-2880309 **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:

REEVES, WILLIAM
9673 BAYOU BLUFF DR.
JACKSONVILLE, FL 32257 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
Name: REEVES, WILLIAM
Address: 9673 BAYOU BLUFF DR.
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D
Name: WARE, DOUG
Address: 9655 BAYOU BLUFF
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: S
Name: FINNERAN, DEANNE
Address: 4125 GRENSHAW CT
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: T
Name: SNIPES, KAREN V
Address: 4117 GRENSHAW CT
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D
Name: FORTUNATO, MICHAEL
Address: 9697 BAYOU BLUFF DR
City-St-Zip: JACKSONVILLE, FL 32257

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 V SNIPES

TRES

05/03/2010

Electronic Signature of Signing Officer or Director

Date