

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 8:00 am
Secretary of State

03-14-2008 90045 010 ****61.25

DOCUMENT # N17341

1. Entity Name
**OAK TERRACE OF MANATEE HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**P.O. BOX 651
ONECO, FL 34264**

Mailing Address
**P.O. BOX 651
ONECO, FL 34264**

40046000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01182008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0135409

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MATTOX, REBECCA
3533 55TH SR. E
BRADENTON, FL 34203**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME **P** ☐ Delete
STREET ADDRESS **THAGGARD, STEVE**
CITY-ST-ZIP **5614 35TH CT. E
BRADENTON, FL 34203**

TITLE
NAME **P** ☒ Change ☐ Addition
STREET ADDRESS **BOGNAR, NANCY**
CITY-ST-ZIP **5501 35TH CT. E
BRADENTON, FL 34203**

TITLE
NAME **VPD** ☐ Delete
STREET ADDRESS **BOGNAR, NANCY**
CITY-ST-ZIP **5501 35TH CT. E
BRADENTON, FL 34203**

TITLE
NAME **VPD** ☒ Change ☐ Addition
STREET ADDRESS **THAGGARD, STEVE**
CITY-ST-ZIP **5614 35TH CT. E
BRADENTON, FL 34203**

TITLE
NAME **S** ☐ Delete
STREET ADDRESS **SMITH, MIKE**
CITY-ST-ZIP **5615 35TH CT. E
BRADENTON, FL 34203**

TITLE
NAME **S** ☐ Change ☐ Addition
STREET ADDRESS **SMITH, MIKE**
CITY-ST-ZIP **5616 35TH CT. E
BRADENTON, FL 34203**

TITLE
NAME **T** ☐ Delete
STREET ADDRESS **MATTOX, REBECCA**
CITY-ST-ZIP **3533 55TH DR E
BRADENTON, FL 34203**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Rebecca Mattox

March 5, 2008