

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18394

FILED
Apr 07, 2009
Secretary of State

Entity Name: THE OAKS OF SEMINOLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11800 PARK BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

7300 PARK ST.
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 59-2811022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK ST.
SEMINOLE, FL 33777 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 () Delete
Name: HOM, LES
Address: 11800 PARK BLVD #105
City-St-Zip: SEMINOLE, FL 33772

Title: VP () Delete
Name: COUGHLAN, PATRICIA
Address: 11800 PARK BLVD #311
City-St-Zip: SEMINOLE, FL 33772

Title: T () Delete
Name: HERBERT, PATRICIA
Address: 11800 PARK BLVD #106
City-St-Zip: SEMINOLE, FL 33772

Title: S () Delete
Name: HERTER, DONNA
Address: 11800 PARK BLVD. #302
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: KLOPPERS, JANNIE
Address: 11800 PARK BOULEVARD #312
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HERTER, DONNA
Address: 11800 PARK BLVD #302
City-St-Zip: SEMINOLE, FL 33772

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

Title: T (X) Change () Addition
Name: D'ORLANDO, CYNTHIA
Address: 11800 PARK BLVD #409
City-St-Zip: SEMINOLE, FL 33772

Title: S (X) Change () Addition
Name: OUTTEN, ELAINE
Address: 11800 PARK BLVD. #206
City-St-Zip: SEMINOLE, FL 33772

Title: () Change () Addition
Name:
Address:
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: DONNA HERTA

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date