2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2005 8:00 am
Secretary of State
03-07-2005 90255 028 ****61.25

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1st MOORE CR2E037 (10/04)

DOCUMENT # N19151

1. Entity Name

OAK HILL VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
104 OAKHILL VIEW DRIVE VALRICO FL 33594-3326 US	104 OAKHILL VIEW DRIVE VALRICO FL 33594-3326 US

2. Principal Place of Business	3. Mailing Address
2781 OAKHILL VILLAGE CR.	2781 OAKHILL VILLAGE CR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: VALRICO, FL	City & State: VALRICO, FL
Zip: 33594-3323 Country: USA	Zip: 33594-3323 Country: USA

4. FEI Number: 59-2863552 ☐ Applied For ☐ Not Applicable

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
HATHEWAY, CHARLES H 104 OAKHILL VIEW DRIVE VALRICO FL 33594	Name: GEORGETTE KEITH Street Address (P.O. Box Number is Not Acceptable): 2781 OAKHILL VILLAGE CIRCLE City: VALRICO FL Zip Code: 33594-3323

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: Georgette Keith 2-28-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

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 / STREET ADDRESS / CITY-ST-ZIP	P RICHARDSON, ABBY 2734 OAKHILL VILLAGE CIRCLE VALRICO FL 33594	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BOLL, HARRY 2502 OAKHILL PARK PLACE VALRICO FL 33594	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HATHEWAY, CHARLES H 104 OAKHILL VIEW DRIVE VALRICO FL 33594	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GEORGETTE KEITH 2781 OAKHILL VILLAGE CR. VALRICO, FL 33594-3323 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MAYES, GAYLON 2737 OAKHILL VILLAGE CIRCLE VALRICO FL 33594	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHIRLEY GOMBATTO 2640 OAKHILL VILLAGE CR. VALRICO, FL 33594 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHARDSON, ROBERT 2734 OAKHILL VILLAGE CIRCLE VALRICO FL 33594	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CASSIDY, ROSE MARY 108 OAKHILL VIEW DRIVE VALRICO FL 33594	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARBARA GOGGIN 2512 OAKHILL PARK PLACE VALRICO, FL 33594 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Abby Richardson 3-31-05 (813) 657-5589
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #