

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19755

FILED
Jan 15, 2009
Secretary of State

Entity Name: OAKLANE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2204 SPOONBILL KCT
VALRICO, FL 33594 US

New Principal Place of Business:

2204 SPOONBILL CT
VALRICO, FL 33596 US

Current Mailing Address:

2204 SPOONBILL KCT
VALRICO, FL 33594 US

New Mailing Address:

2204 SPOONBILL CT
VALRICO, FL 33596 US

FEI Number: 65-0199480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENGLISH, CHERYL
2204 SPOONBILL CT
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

ENGLISH, CHERYL
2204 SPOONBILL CT
VALRICO, FL 33596 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:

01/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ENGLISH, CHERYL
Address: 2204 SPOONBILL CT
City-St-Zip: VALRICO, FL 33594

Title: DV () Delete
Name: FOX, ELAINE
Address: 2202 SPOONBILL CT
City-St-Zip: VALRICO, FL 33594

Title: DS () Delete
Name: NANNNS, KATHY
Address: 3016 CUNARD DR
City-St-Zip: VALRICO, FL 33594

Title: DT (X) Delete
Name: LANNIE, RICK
Address: 2203 SPOONBILL CT
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ENGLISH, CHERYL
Address: 2204 SPOONBILL CT
City-St-Zip: VALRICO, FL 33596 US

Title: DV (X) Change () Addition
Name: FOX, ELAINE
Address: 2202 SPOONBILL CT
City-St-Zip: VALRICO, FL 33596 US

Title: DS (X) Change () Addition
Name: NANNNS, KATHY
Address: 3016 CUNARD DR
City-St-Zip: VALRICO, FL 33596 US

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: CHERYL ANNE ENGLISH

DP

01/15/2009

Electronic Signature of Signing Officer or Director

Date