## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N23535

FILED Apr 09, 2007 Secretary of State

Entity Name: THE OAKS OF WEKIWA OWNERS ASSOCIATION, INC.

	illicipai i lacc	of Business:	New Prince	cipal Place of Business:
2180 W SF STE 5000 LONGWO	R 434 OD, FL 32779	US		
Current Mailing Address:		New Maili	New Mailing Address:	
2180 W SF	D 131			
STE 5000	OD, FL 32779	US		
FEI Number:	: 59-3060940	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:
SENTRY N 2180 W SI	MES W JR. MANAGEMENT R 434 STE 5000 OD, FL 32779	Ó		
	named entity s e of Florida.	submits this statement for the	e purpose of changing	its registered office or registered agent, or both
SIGNATUF	RE:			
		ic Signature of Registered A	gent	Date
OFFICER	S AND DIREC	TORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTO
Γitle:	PD ()	Delete	Title:	( ) Change ( ) Addition
	PD () MCMASTERS, F	Delete RICK	Title: Name:	() Change () Addition
√ame: Address:	MCMASTERS, F 1000 PIEDMON	RICK T OAKS DR		() Change () Addition
Name: Nddress:	MCMASTERS, F	RICK T OAKS DR	Name:	() Change () Addition
Name: Address: City-St-Zip:	MCMASTERS, F 1000 PIEDMON APOPKA, FL 32	RICK T OAKS DR 2703	Name: Address:	
Name: Address: City-St-Zip: Fitle:	MCMASTERS, F 1000 PIEDMON APOPKA, FL 32	RICK T OAKS DR 2703 Delete	Name: Address: City-St-Zip:	
Name: Address: Dity-St-Zip: Fitle: Name:	MCMASTERS, F 1000 PIEDMON APOPKA, FL 32 TD ()	RICK T OAKS DR 2703 Delete ERT	Name: Address: City-St-Zip: Title:	SD (X) Change ( ) Addition
Name: Address: City-St-Zip: Fitle: Name: Address:	MCMASTERS, F 1000 PIEDMON APOPKA, FL 32 TD () MCCALL, ROBE	RICK T OAKS DR 2703 Delete ERT OAKS DRIVE	Name: Address: City-St-Zip: Title: Name:	SD (X) Change ( ) Addition VAUTIER, DEBORAH
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip:	MCMASTERS, F 1000 PIEDMON APOPKA, FL 32 TD () MCCALL, ROBE 954 PIEDMONT APOPKA, FL 32	RICK T OAKS DR 2703 Delete ERT OAKS DRIVE 2703	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition VAUTIER, DEBORAH 1054 PIEDMONT OAKS CT APOPKA, FL 32703
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I hereby certify that the information supplied with this filing does not qualify for the 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: RICK MCMASTERS PD 04/09/2007