


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 AM
Secretary of State

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| DOCUMENT # N24642 1. Entity Name BIG OAKS HOMEOWNER ASSOCIATION, INC. |  |
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| Principal Place of Business 1032 BIG OAKS BOULEVARD OVIEDO, FL 32765 US | Mailing Address 1032 BIG OAKS BOULEVARD OVIEDO, FL 32765 US |
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01172007 No Chg-NP CR2E037 (4/06)

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|---|--------------------------------|
| 4. FEI Number 59-2872324 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent SWITCH, JAY M 1032 BIG OAKS BLVD. OVIEDO, FL 32765 |
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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD SWITCH, JAY 1032 BIG OAKS BLVD OVIEDO, FL 32765 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD WIDDOWS, JAMES 1008 BIG OAKS BLVD OVIEDO, FL 32765 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD BELOW, SCOTT 1042 BIG OAKS BLVD OVIEDO, FL 32765 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD THOMAS, RIDLEY 1029 BIG OAKS BLVD OVIEDO, FL 32765 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD GOETZ, JOHN 1005 BIG OAKS BLVD OVIEDO, FL 32765 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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01/22/07-80023-002 61.25

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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:  **JAY M SWITCH** **1-17-07 4073654302**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #