


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90117 032 ****61.25

DOCUMENT # N25121 1. Entity Name OAKVIEW OWNERS' ASSOCIATION INC.					
Principal Place of Business 1500 OAKVIEW CIR SE WINTER HAVEN, FL 33880			Mailing Address 1500 OAKVIEW CIR SE WINTER HAVEN, FL 33880 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
6. Name and Address of Current Registered Agent PLEDGER, BETTY L 1577 OAKVIEW CIRCLE SE WINTER HAVEN, FL 33880			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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: <u>Betty L. Pledger</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD DASS, OLETA 1585 OAKVIEW CIRCLE S.E. WINTER HAVEN, FL 33880	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HESTER, RAYMOND G 1534 OAKVIEW CIRCLE S.E. WINTER HAVEN, FL 33880	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SKINNER, EDWARD 1516 OAKVIEW CIRCLE S.E. WINTER HAVEN, FL 33880	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, LOIS M 1512 OAKVIEW CIRCLE S.E. WINTER HAVEN, FL 33880	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PLEDGER, BETTY L 1577 OAKVIEW CIRCLE SE WINTER HAVEN, FL 33880	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ARDITO, ROCKY 1506 OAKVIEW CIRCLE SE WINTER HAVEN FL 33880	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: <u>Betty L. Pledger</u> - Betty L. Pledger					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					<small>Date</small>
					<small>Daytime Phone #</small>

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DOCUMENT # N25121

1. Entity Name
OAKVIEW OWNERS' ASSOCIATION INC.



Principal Place of Business
1500 OAKVIEW CIR SE
WINTER HAVEN, FL 33880

Mailing Address
1500 OAKVIEW CIR SE
WINTER HAVEN, FL 33880 US

ATTACHMENT
20016468
#N25121

DO NOT WRITE IN THIS SPACE

01052006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2892319

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PLEDGER, BETTY L
1577 OAKVIEW CIRCLE SE
WINTER HAVEN, FL 33880

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IN THIS SPACE

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SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DASS, OLETA
STREET ADDRESS	1585 OAKVIEW CIRCLE S.E.
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	VD
NAME	HESTER, RAYMOND G
STREET ADDRESS	1534 OAKVIEW CIRCLE S.E.
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	SD
NAME	SKINNER, EDWARD
STREET ADDRESS	1516 OAKVIEW CIRCLE S.E.
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	D
NAME	THOMAS, LOIS M
STREET ADDRESS	1512 OAKVIEW CIRCLE S.E.
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	TD
NAME	PLEDGER, BETTY L
STREET ADDRESS	1577 OAKVIEW CIRCLE SE
CITY - ST - ZIP	WINTER HAVEN, FL 33880
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE
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SIGNATURE