

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB -7 PM 4:14

DOCUMENT # N25332 (0)  
1. Corporation Name  
GARDEN OAKS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address  
CHARLES H. HATHAWAY  
4500 PGA BOULEVARD  
PALM BEACH GARDENS FL 33410  
CHARLES H. HATHAWAY  
4500 PGA BOULEVARD  
PALM BEACH GARDENS FL 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/10/1988 3a. Date of Last Report 02/10/1994  
4. FEI Number 65-0034881 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 25 P.O. Box 4594  
22 City & State 27 Suite, Apt. #, etc.  
23 City & State 28 Tequesta, FL  
24 Zip 25 Country 29 33469 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HATHAWAY, CHARLES H.  
4500 PGA BOULEVARD  
PALM BEACH GARDENS FL 33410

81 Name Campbell, Theresa  
82 Street Address (P.O. Box Number is Not Acceptable)  
900 East Indiantown Rd  
83 Ste 210  
84 City Jupiter FL 85 Zip Code 33477

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Theresa Campbell

(NOTE: Registered Agent signature required when reappointing)

1/25/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME HATHAWAY, CHARLES H.  
STREET ADDRESS 4500 PGA BOULEVARD  
CITY - ST - ZIP PALM BEACH GARDEN FL  
TITLE VD  
NAME KAIRALLA, ROBERT S.  
STREET ADDRESS 4500 PGA BOULEVARD  
CITY - ST - ZIP PALM BEACH GARDEN FL  
TITLE STD  
NAME SHANNON, WILLIAM E.  
STREET ADDRESS 4500 PGA BOULEVARD  
CITY - ST - ZIP PALM BEACH GARDEN FL  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.1 TITLE P.O. ☒ Change ☐ Addition  
1.2 NAME Burke, Donald  
1.3 STREET ADDRESS 8508 Doverbrook Dr  
1.4 CITY - ST - ZIP Palm Bch Gardens, FL 33410  
2.1 TITLE VD ☒ Change ☐ Addition  
2.2 NAME J.R. Maccurdy  
2.3 STREET ADDRESS 8483 Beaconwill Rd  
2.4 CITY - ST - ZIP Palm Bch Gardens, FL 33410  
3.1 TITLE S.O. ☒ Change ☐ Addition  
3.2 NAME Haymond, J. Gregory  
3.3 STREET ADDRESS 8536 Doverbrook Dr  
3.4 CITY - ST - ZIP Palm Bch Gardens, FL 33410  
4.1 TITLE T.D. ☐ Change ☒ Addition  
4.2 NAME Tondreau, Norman G  
4.3 STREET ADDRESS 3339 Old Forrest Rd  
4.4 CITY - ST - ZIP Palm Bch Gardens, FL 33410  
5.1 TITLE VD ☐ Change ☒ Addition  
5.2 NAME John Blysm  
5.3 STREET ADDRESS 4240 Royal Oak Dr  
5.4 CITY - ST - ZIP Palm Bch Gardens, FL 33410  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 12 or Block 13 if change of officers or directors is indicated.

SIGNATURE:

NOT A TRUE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature (Print Name)