

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90170 047 \*\*\*\*61.25

DOCUMENT # N28289

1. Corporation Name

OAKHILL FARMS, UNIT II HOMEOWNERS ASSOCIATION, I  
NC.

Principal Place of Business

1152 GREEN HILL TRACE  
TALLAHASSEE FL 32311

Mailing Address

1152 GREEN HILL TRACE  
TALLAHASSEE FL 32311



2. Principal Place of Business

21 Suite, Apt. #, etc.  
22 1057 Epping Forest Dr

23 City & State  
Tallahassee, Fla

24 Zip  
32311

25 Country  
USA

2a. Mailing Address

26 Suite, Apt. #, etc.  
27 1057 Epping Forest Dr

28 City & State  
Tallahassee, Fla

29 Zip  
32311

30 Country  
USA

3. Date Incorporated or Qualified

09/09/1988

4. FEI Number

65-0250023

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

10. Name and Address of New Registered Agent

81 Name

GOTTI, APRIL

82 Street Address (P.O. Box Number is Not Acceptable)

1057 Epping Forest Dr

83 City

Tallahassee, FL

84 City

FL

85 Zip Code

32311

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME WILEY, EUGENE N II  
STREET ADDRESS 1152 GREEN HILL TRACE  
CITY-ST-ZIP TALLAHASSEE FL 32311

TITLE VD ☒ DELETE

NAME ABBOTT, DARCY  
STREET ADDRESS 1138 GREEN HILL TRACE  
CITY-ST-ZIP TALLAHASSEE FL 32311

TITLE TD ☒ DELETE

NAME HOLIDAY, PARTICK  
STREET ADDRESS 1046 EPPING FOREST DR  
CITY-ST-ZIP TALLAHASSEE FL 32311

TITLE SD ☒ DELETE

NAME LYNES, LYNDA  
STREET ADDRESS 1175 GREEN HILL TRACE  
CITY-ST-ZIP TALLAHASSEE FL 32311

TITLE D ☐ DELETE

NAME GOTTI, APRIL  
STREET ADDRESS 1057 EPPING FOREST DRIVE  
CITY-ST-ZIP TALLAHASSEE FL 32311

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME GOTTI, APRIL  
1.3 STREET ADDRESS 1057 EPPING FOREST DR  
1.4 CITY-ST-ZIP Tallahassee, FL 32311

2.1 TITLE VBD ☐ Change ☐ Addition

2.2 NAME Holiday, Patrick  
2.3 STREET ADDRESS 1138 GREEN HILL TR  
2.4 CITY-ST-ZIP Tallahassee, FL 32311

3.1 TITLE TBD ☒ Change ☐ Addition

3.2 NAME MONTFORD, DAVID  
3.3 STREET ADDRESS 1182 GREEN HILL TRACE  
3.4 CITY-ST-ZIP Tallahassee, FL 32311

4.1 TITLE SD ☒ Change ☐ Addition

4.2 NAME MONTFORD, MAYBELLE  
4.3 STREET ADDRESS 1182 GREEN HILL TRACE  
4.4 CITY-ST-ZIP Tallahassee, FL 32311

5.1 TITLE P ☒ Change ☐ Addition

5.2 NAME Annin, Heath  
5.3 STREET ADDRESS 1047 EPPING FOREST DR  
5.4 CITY-ST-ZIP Tallahassee, FL 32311

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4-19-99

Wk 1081-5704/9420300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)