2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N31864

Entity Name: OAK BLUFFS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

% FRANK D. UPCHURCH, III
780 N. PONCE DE LEON BLVD
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

% FRANK D. UPCHURCH, III
P. O. DRAWER 3007
ST. AUGUSTINE, FL 32085 US

New Mailing Address:

FEI Number: 59-2947005 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UPCHURCH, FRANK D., III
780 N. PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHRADER, JOHN G
Address: 4135 CREEKBLUFF DR
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D ( ) Delete
Name: TERRY, RUSSELL
Address: 4149 CREEKBLYFF DR
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: STD ( ) Delete
Name: UPCHURCH, FRANK D III
Address: 4148 CREEKBLUFF DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: PD ( ) Delete
Name: MCCARTY, ANTHONY O
Address: 4112 CREEKBLUFF DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D ( ) Delete
Name: O'CONNELL, W. HENRY
Address: 2825 LEWIS SPEEDWAY #104
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FRANK D. UPCHURCH III STD 04/30/2009

Electronic Signature of Signing Officer or Director — Date