

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32348

FILED  
Mar 19, 2007  
Secretary of State

**Entity Name:** OLEANDER WOODS II HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

720 SAMUEL CHASE LANE  
WEST MELBOURNE, FL 32904 US

**New Principal Place of Business:**

**Current Mailing Address:**

720 SAMUEL CHASE LANE  
WEST MELBOURNE, FL 32904 US

**New Mailing Address:**

**FEI Number:** 59-2979142

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAUK, ROBERT  
720 SAMUEL CHASE LANE  
WEST MELBOURNE, FL 32904 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: PD ( ) Delete  
Name: TAYLOR, DOUGLAS  
Address: 708 SAMUEL CHASE LANE  
City-St-Zip: W. MELBOURNE, FL 32904

Title: SD ( ) Delete  
Name: TAYLOR, NORA  
Address: 708 SAMUEL CHASE LANE  
City-St-Zip: W. MELBOURNE, FL 32904

Title: TD ( ) Delete  
Name: LAUK, ROBERT C.  
Address: 720 SAMUEL CHASE LANE  
City-St-Zip: W. MELBOURNE, FL

Title: VD ( ) Delete  
Name: GULJORD, LEAH  
Address: 723 SAMUEL CHASE LANE  
City-St-Zip: W. MELBOURNE, FL 32904 US

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT LAUK

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03/19/2007

Electronic Signature of Signing Officer or Director

Date