2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2006
Secretary of State

DOCUMENT# N32702

Entity Name: THE OAKS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O LEE DANDO
101 RIVERVIEW TERR
E PALATKA, FL 32131

New Principal Place of Business:

Current Mailing Address:

C/O LEE DANDO
101 RIVERVIEW TERR
E. PALATKA, FL 32131

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PICKENS, JOE H.
113 N. 4TH STREET
PALATKA, FL 32077 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:	P	( ) Delete
Name:	TAYLOR, LARRY	
Address:	124 RIVERSEDGE DR	
City-St-Zip:	EAST PALATKA, FL	
Title:	STD	( ) Delete
Name:	DANDO, LEE,	
Address:	101 RIVERVIEW TERRACE	
City-St-Zip:	EAST PALATKA, FL	
Title:	D	( ) Delete
Name:	HAYNES, DANA	
Address:	113 RIVERS EDGE DR	
City-St-Zip:	EAST PALATKA, FL 32131	
Title:	D	( ) Delete
Name:	KENNEDY, CHRISTOPHER	
Address:	115 RIVERS EDGE DR	
City-St-Zip:	EAST PALATKA, FL 32131	
Title:	D	( ) Delete
Name:	MCCLOUD, IZELLE	
Address:	110 WATER OAK CT	
City-St-Zip:	EAST PALATKA, FL 32131	
Title:	D	( ) Delete
Name:	PARNELL, WALTER	
Address:	107 WATER OAK CT	
City-St-Zip:	EAST PALATKA, FL 32131	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	STD	(X) Change ( ) Addition
Name:	DANDO, LEE/ SECRETAR, Y, TREASURER	
Address:	101 RIVERVIEW TERRACE	
City-St-Zip:	EAST PALATKA, FL	
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: LEE DANDO/SECRETARY, TREASURER SECR 08/28/2006
Electronic Signature of Signing Officer or Director — Date