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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # N33490 (6)

1. Corporation Name

SOUTH OAKS HOMEOWNERS' ASSOCIATION OF MELBOURNE, INC.

Principal Place of Business	Mailing Address
4073 TWIN OAKS BLVD. MELBOURNE FL 32901	4073 TWIN OAKS BLVD. MELBOURNE FL 32901-8439

3. Date Incorporated or Qualified: 07/31/1989
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-2952558 ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BECK, JOHN
908 SOUTH FORK CIRCLE
MELBOURNE FL 32901

10. Name and Address of New Registered Agent

81 Name: Helen Martens
82 Street Address (P.O. Box Number is Not Acceptable)
83: 1027 South Fork Circle
84 City: Melbourne **FL** 85 Zip Code: 32901

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 * Helen L. Martens 4/9/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	PROULX, LORI		1.2 NAME	Simon, Don	
STREET ADDRESS	998 SOUTH FORK CIRCLE		1.3 STREET ADDRESS	1076 South Fork Circle	
CITY-ST-ZIP	MELBOURNE FL 32901		1.4 CITY-ST-ZIP	Melbourne, Fl 32901	
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	THOMS, KEN		2.2 NAME	Petrak, Paul	
STREET ADDRESS	1092 SOUTH FORK CIRCLE		2.3 STREET ADDRESS	1080 South Fork Circle	
CITY-ST-ZIP	MELBOURNE FL 32901		2.4 CITY-ST-ZIP	Melbourne, Fl 32901	
TITLE	SD	☒ DELETE	3.1 TITLE	SD	☐ Change ☒ Addition
NAME	LUND, JEAN		3.2 NAME	Hammond, Pat	
STREET ADDRESS	1050 SOUTH FORK CIRCLE		3.3 STREET ADDRESS	1072 South Fork Circle	
CITY-ST-ZIP	MELBORUNE FL 32901		3.4 CITY-ST-ZIP	Melbourne, Fl 32901	
TITLE	TD	☒ DELETE	4.1 TITLE	TD	☐ Change ☒ Addition
NAME	BECK, JOHN		4.2 NAME	Martens, Helen	
STREET ADDRESS	908 SOUTH FORK CIRCLE		4.3 STREET ADDRESS	1027 South Fork Circle	
CITY-ST-ZIP	MELBOURNE FL 32901		4.4 CITY-ST-ZIP	Melbourne, Fl 32901	
TITLE	D	☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	DANIELS, TRUDY		5.2 NAME	Pierce, John	
STREET ADDRESS	953 SOUTH FORK CIRCLE		5.3 STREET ADDRESS	4066 Green Oak Dr.	
CITY-ST-ZIP	MELBOURNE FL 32901		5.4 CITY-ST-ZIP	Melbourne, Fl 32901	
TITLE	D	☐ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	KAPLAN, MURIEL		6.2 NAME	Flanagan, Ruth	
STREET ADDRESS	1006 SOUTH FORK CIRCLE		6.3 STREET ADDRESS	933 South Fork Circle	
CITY-ST-ZIP	MELBOURNE FL 32901		6.4 CITY-ST-ZIP	Melbourne, Fl 32901	

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14. I do 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.

SIGNATURE: Helen L. Martens 4-9-97