## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 12, 2007 8:00 am Secretary of State

DOCUMENT # N34644  1. Entity Name SCARLETT OAKS OWNERS ASSOCIATION, INC.							03-12-2007 90086 041 ****61.25					
Principal Place of Business Mailing Address 7250 VELVET OAKS CT 7250 VELVET OAKS CT IACKSONVILLE, FL 32277 US IACKSONVILLE, FL 32277 US							TB      TB	3111 <b>8 1828 8</b> 741 <b>81</b> 512 8	isi Risk Birn S	NEN 21811 EISH BIS	ikir di lêri	
2. Principal Place of Business - No P.O. Box # 3. Mailir				ailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			<del></del>		01302007	Chg-NP	CR2E	037 (12/06)	
City & State			City & State					4. FEI Number 59-29990	029			plied For at Applicable
Zip Country				Coun	Certificate of Status Decired [7]				\$8.75 Add Fee Require			
·	6. Name and	Address of Current	Registered	Agent				7. Name and A	ddress of New	Registered	l Agent	
		-				Name	A		11-0			
PERRY, D		_			<u> </u>		_775	13C42,	MAN			
7250 VELVET OAKS CT					1	Street Address (P.O. Box Number, is Not Acceptable)						
JACKSON	IVILLE, FL 32	277			-		_/_	50 Vel	ver Un	71.3 C	./.	
								sonville		FI	ー・・・シベイ	277
8. The above the obligat	named entity sub tions of registered	mits this statement fi agent.	or the purpos	e of changing its	registered	d office or	registere	ed agent, or both,	, in the State of F	Florida. I an	n familiar with,	and accept
SIGNATURE	1) an	Hungar ted name ghogistered agen	<u> </u>	No.	. 0			when reinstating)		03-0	24-07	7
	olgrano e, ny god or prin		t and made it applica		mysterec /	- Осна воднять	e reduied	Andri Lauretening )		DATE		ļ
Filing Fee is \$61.25 9. Election Camp Due by May 1, 2007 Trust Fund Co								\$5.00 May Be Added to Fees  Make check payable to Florida Department of State				
	<del>-</del> ,							\$5.00 May Be Added to Fees				
10	<del>-</del> ,	1, 2007	PECTORS		Contributio		∐ ———	Added to Fees	Flo	orida Depa	artment of St	tate
10.	Due by May		RECTORS	Trust Fund C	Contribution 11.		∐ ———	\$5.00 May Be Added to Fees DDITIONS/CHAN	Flo	orida Depa	DIRECTORS IN	inte
TITLE	<b>Due by May</b>	1, 2007 OFFICERS AND D	RECTORS		11.		∐ ———	Added to Fees	Flo	orida Depa	artment of St	tate
-TITLE NAME	P/D SPEIGHTS, L/	1, 2007 OFFICERS AND DI	RECTORS	Trust Fund C	11. TITLE	n.	∐ ———	Added to Fees	Flo	orida Depa	DIRECTORS IN	inte
TITLE NAME STREET ADDRESS	P/D SPEIGHTS, L/ 3646 CRIMSO	1, 2007 OFFICERS AND DI  AMAR ON OAKS DR	RECTORS	Trust Fund C	11. TITLE NAME STREET	ADORESS	∐ ———	Added to Fees	Flo	orida Depa	DIRECTORS IN	inte
-TITLE NAME	P/D SPEIGHTS, L/ 3846 CRIMSO JACKSONVILI	1, 2007 OFFICERS AND DI  AMAR ON OAKS DR	RECTORS	Trust Fund C	11. TITLE	ADORESS	∐ ———	Added to Fees	Flo	orida Depa	DIRECTORS IN	inte
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D SPEIGHTS, L/ 3846 CRIMSO JACKSONVILI V.D BRETZ, RICH	AMAR NO OAKS DR LE, FL 32277	RECTORS	Trust Fund C	11. TITLE NAME STREET CITY-S	ADORESS	∐ ———	Added to Fees	Flo	orida Depa	DIRECTORS IN Change	I 10 Addition
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

an /y

Dan Axscu

03-04-07

904 7430221

Daytime Phone