

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90035 010 ****61.25

DOCUMENT # N39980

1. Entity Name

OAK-LAND PARK MHP HOME OWNERS ASSOCIATION, INC.



Principal Place of Business

**1159 HANDY OAK CIR
WEST PALM BEACH FL 33411
US**

Mailing Address

**1159 HANDY OAK CIRCLE
WEST PALM BEACH FL 33411**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

65-0243576

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SIEBER, ROBERT
1165 HANDY OAK CIR
WEST PALM BEACH FL 33411**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DECKELBOIM, DENISE 1081 HANDY OAK CIR WEST PALM BEACH FL 33411 <i>Same</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIEBER, ROBERT 1165 HANDY OAK CIR WEST PALM BEACH FL 33411 <i>Same</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VICARI, SYLVIA 1051 HANDY OAK CIR. WEST PALM BEACH FL 33411	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COZZAGLIO, JEFF 1063 HANDY OAK CIR WEST PALM BEACH FL 33411	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TIANELLO, WILLIAM 1177 HANDY OAK CIR. WEST PALM BEACH FL 33411 <i>Same</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNOCU, STANLEY JR 1093 HANDY OAK CIR. WEST PALM BEACH FL 33411	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>SD Barbara Sieber 1165 Handy Oak Cir West Palm Beach, FL 33411</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>D Sheila Shaw 1120 Handy Oak Circle West Palm Beach, FL 33411</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>KNOLE, STANLEY JR V.P. 1093 HANDY OAK CIR. W.P.B. FL. 33411</i>

12. I 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 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:

Robert Sieber - Robert Sieber

Date

Daytime Phone #

-1/24/05 (561-795-3361)