

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42242

FILED
Feb 20, 2006
Secretary of State

Entity Name: OAK HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 265
CLARCONA, FL 327100265

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 265
CLARCONA, FL 327100265

New Mailing Address:

FEI Number: 59-3252708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, KARL
202 PINEY WOODS RD
APOPKA, FL 32703 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: DP () Delete
Name: HUDSON, KARL
Address: 202 PINEY WOODS RD
City-St-Zip: APOPKA, FL 32703

Title: DST () Delete
Name: DANIELSON, GYPSY
Address: 203 PINEY WOODS RD
City-St-Zip: APOPKA, FL 32703 US

Title: DV () Delete
Name: KING, RACHEL
Address: 3125 OAK ALLEY DR
City-St-Zip: APOPKA, FL 32703 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:

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: GYPSY DANIELSON

DST

02/20/2006

Electronic Signature of Signing Officer or Director

Date