2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2004 8:00 am
Secretary of State
03-03-2004 90011 040 ****61.25

DOCUMENT # N42973

1. Entity Name

OAK POND HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1322 SO. STARLING DR. INVERNESS FL 34450 US	1322 SO. STARLING DR. INVERNESS FL 34450 US

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
1322 So STARLING DR	1322 So STARLING DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: INVERNESS, FL	City & State: INVERNESS, FL
Zip: 34450 Country: USA	Zip: 34450 Country: USA

4. FEI Number 59-3052082 ☐ 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
ACKERMAN, HAROLD 1322 SO. STARLING DR. INVERNESS FL 34450	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 Harold Ackerman 2/26/04

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, 2004

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 KIM, KENNETH W 1380 S STARLING DR INVERNESS FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WHITCOMB, RAYMOND F 1399 S. DOVE LOOP INVERNESS, FL 34450	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEEMING, KENNETH 1325 DOVE KIE TERR. INVERNESS FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MEARS, BEN 1390 SO STARLING DR INVERNESS, FL 34450	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WHITCOMB, RAYMOND 1399 SO. DOVE LOOP INVERNESS FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WHITCOMB, RAYMOND F 1399 S. DOVE LOOP INVERNESS, FL 34450	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ACKERMAN, HAROLD 1322 1350 S STARLING DR INVERNESS FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ACKERMAN, HAROLD 1322 S. STARLING DR INVERNESS, FL 34450	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MITCHELL, CAROLYN 1391 SO. STARLING DR. INVERNESS FL 34450	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEARLS, JACK 1340 S DOUKIE TERR INVERNESS FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIM, KENNETH W 1380 S. STARLING DR INVERNESS, FL 34450	☑ Change ☐ Addition

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: Harold Ackerman HAROLD ACKERMAN 2/26/04 352-726-7568

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #