2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 8:00 am
Secretary of State
02-24-2005 90034 048 ****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

01192005 Chg-NP CR2E037 (10/03)

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: WILMA ACKERMAN Street Address (P.O. Box Number is Not Acceptable): 1322 So STARLING DR City: INVERNESS FL Zip Code: 34450

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: Wilma Ackerman Wilma Ackerman 2/22/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing 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 WHITCOMB, RAYMOND F 1399 S. DOVE LOOP INVERNESS, FL 34450	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MEANS, BEN 1390 S. STARLING DR INVERNESS, FL 34450	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARGUERITE HADLEY 1385 So. DOUCKIE TERRACE INVERNESS, FL 34450 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PS WHITCOMB, RAYMOND F 1399 S. DOVE LOOP INVERNESS, FL 34450	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SARAH RAY 1397 So. STARLING DR INVERNESS, FL 34450 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ACKERMAN, HAROLD 1322 S. STARLING DR. INVERNESS, FL 34450	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WILMA ACKERMAN 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	D WILLIAM RAY 1397 S. STARLING DR INVERNESS, FL 34450 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIM, KENNETH W 1380 S. STARLING DR INVERNESS, FL 34450	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ISOBEL BRITTIN 1360 So. 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: Wilma Ackerman Wilma Ackerman 2/22/05 352-726-1568
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #