

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90113 008 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # N46839

1. Corporation Name

OAKBROOKE COMMUNITY ASSOCIATION, INC.

Principal Place of Business

OAKBROOKE COMMUNITY
 5803 BRADEN RUN
 BRADENTON FL 34202
 US

Mailing Address

OAKBROOKE COMMUNITY
 5803 BRADEN RUN
 BRADENTON FL 34202
 US



2. Principal Place of Business 21 9115 58th DR. E. Suite, Apt. #, etc. 22 Suite A City & State 23 BRADENTON, FL Zip Country 24 34202 25 USA		2a. Mailing Address 26 9115 58th DR. E. Suite, Apt. #, etc. 27 Suite A City & State 28 BRADENTON, FL Zip Country 29 34202 30 USA		3. Date Incorporated or Qualified 01/15/1992 4. FEI Number 65-0385476 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
---	--	--	--	--	--

9. Name and Address of Current Registered Agent

CROWN-BOLTZ, KITT
5803 BRADEN RUN
BRADENTON FL 34202

10. Name and Address of New Registered Agent

81 Name	Phillip D. Leckey		
82 Street Address (P.O. Box Number is Not Acceptable)	9115 58th Drive East Suite B		
83			
84 City	BRADENTON	85 Zip Code	FL 34202

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

PHILLIP D. LECKEY

2/12/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition
NAME	LECKEY, PHILLIP D	1.2 NAME	
STREET ADDRESS	5803 BRADEN RUN	1.3 STREET ADDRESS	9115 58th Drive East Suite B
CITY-ST-ZIP	BRADENTON FL 34202	1.4 CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	VD	2.1 TITLE	☒ Change ☐ Addition
NAME	SANDERS, LINDA K	2.2 NAME	
STREET ADDRESS	5803 BRADEN RUN	2.3 STREET ADDRESS	9115 58th Drive East Suite B
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	STD	3.1 TITLE	☐ Change ☐ Addition
NAME	CROWN-BOLTZ, KATHRYN M	3.2 NAME	
STREET ADDRESS	5803 BRADEN RUN	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	ST ROBIN NEIDERT
STREET ADDRESS		4.3 STREET ADDRESS	9115 58th Drive E. Suite A
CITY-ST-ZIP		4.4 CITY-ST-ZIP	BRADENTON, FL 34202
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 officer or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

PHILLIP D. LECKEY

Date

Daytime Phone #

2/12/99

CR2E037 (1/1/98)