

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48627

FILED
Feb 22, 2010
Secretary of State

Entity Name: OAK BEND HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

10620 SW 27TH AVE.
A-076
OCALA, FL 34476 US

New Principal Place of Business:

Current Mailing Address:

10620 SW 27TH AVE.
A-076
OCALA, FL 34476 US

New Mailing Address:

FEI Number: 59-3117022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERLACH, JON
10620 SW 27TH AVE., F-016
OCALA, FL 34476 US

Name and Address of New Registered Agent:

GERLACH, JON R
10620 SW 27TH AVE., F-016
OCALA, FL 34476 US

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: JON R. GERLACH

02/22/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: GERLACH, JON R
Address: 10620 SW 27 TH AVE., F-016
City-St-Zip: OCALA, FL 34476 US

Title: DV
Name: SCHWARTZ, JOHN
Address: 16020 SW 27TH AVE., I-008
City-St-Zip: OCALA, FL 34476 US

Title: DS
Name: LEARD, SHARON
Address: 10620 SW 27TH AVE., M-005
City-St-Zip: OCALA, FL 34476 US

Title: DT
Name: FREY, VIOLET J
Address: 10620 SW 27TH AVE., H-001
City-St-Zip: OCALA, FL 34476 US

Title: D
Name: JUSTICE, ROSE
Address: 10620 SW 27TH AVE., E-013
City-St-Zip: OCALA, FL 34476 US

Title: D
Name: BROWN, DON
Address: 10620 SW 27TH AVE. L-016
City-St-Zip: OCALA, FL 34476 US

I hereby 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 all other like empowered.

SIGNATURE: VIOLET J. FREY

DT

02/22/2010

Electronic Signature of Signing Officer or Director

Date