2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State
03-23-2005 90048 035 ****61.25

DOCUMENT # N48891

1. Entity Name
TOMOKA OAKS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
92 S. ST ANDREWS DRIVE ORMOND BEACH, FL 32174 US	92 S. ST ANDREWS DRIVE ORMOND BEACH, FL 32174 US

02242005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
103 N. ST ANDREWS Dr Suite, Apt. #, etc.	103 N. ST ANDREWS Dr Suite, Apt. #, etc.
City & State: ORMOND BEACH FL Zip: 32174 Country: USA	City & State: ORMOND BCH FL Zip: 32174 Country: USA

4. FEI Number: 59-1992568 ☐ 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
HARVEY, PATRICK 92 S. ST. ANDREWS DR. ORMOND BEACH, FL 32174	Name: BLANCHE PARKS Street Address (P.O. Box Number is Not Acceptable): 103 N. ST ANDREWS Dr City: ORMOND BEACH FL Zip Code: 32174

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: Blanche Parks BLANCHE PARKS 4/18/05 — Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE 2/23/05

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	PD BUTTERFIELD, DAVID 310 RIO PINAR DRIVE ORMOND BEACH, FL 32174	☒ Delete	PD MOORE, KEITT 24 PINE VALLEY CIRCLE ORMOND BCH FL 32174	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD KEITT, MOORE 24 PINE VALLEY CIRCLE ORMOND BEACH, FL 32174	☒ Delete	VPD HARVEY, PATRICK 92 S. ST ANDREWS Dr ORMOND BCH FL 32174	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS DEDO, DIANE 18 OAKMONT CIR ORMOND BEACH, FL	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT HARVEY, PATRICK 92 S. ST. ANDREWS DR ORMOND BEACH, FL 32174	☒ Delete	DT PARKS, BLANCHE 103 N. ST ANDREWS Dr ORMOND BCH FL 32174	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Patrick N Harvey — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 2/23/05 Date — 386-615-0765 Daytime Phone #