

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000868

FILED
Jan 14, 2005
Secretary of State

Entity Name: OAKS AT INDIAN RIVER PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

117 EDEN CREEK LN
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

117 EDEN CREEK LN
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 06-1362045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAUVER, SANDRA S
117 EDEN CREEK LN
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: GRIMES, KEVIN
Address: 122 EDEN CREEK LN
City-St-Zip: JENSEN BEACH, FL 34957

Title: STD () Delete
Name: LAUVER, SANDRA
Address: 117 EDEN CREEK LN
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD () Delete
Name: SMIT, MARTINOS
Address: 7943 HIGHPOINT WAY
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: DELGADO, GIL
Address: 125 EDEN CREEK LANE
City-St-Zip: JENSEN BEACH, FL 34957

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SANDRA LAUVER

STD

01/14/2005

Electronic Signature of Signing Officer or Director

Date