

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000303

FILED  
Mar 07, 2012  
Secretary of State

**Entity Name:** OAKRIDGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2000 MONTCLAIR RD.  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 492228  
LEESBURG, FL 34749 US

**New Mailing Address:**

**FEI Number:** 59-3164132

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORRISON, FRED A  
1000 W MAIN ST  
LEESBURG, FL 34748 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: PD  
Name: CHILDS, TERESA  
Address: 2083 MONTCLAIR ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: VD  
Name: SHAW, GEOFFREY  
Address: 2058 MONTCLAIR ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: SD  
Name: COATS, GLORIA  
Address: 2006 MONTCLAIR ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: TD  
Name: SZUCS, LUANN  
Address: 2054 MONTCLAIR ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: ASD  
Name: DICKINSON, WANDA  
Address: 2066 MONTCLAIR ROAD  
City-St-Zip: LEESBURG, FL 34748

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: TERESA CHILDS

P

03/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date