2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2005 8:00 am Secretary of State

DOCUMENT # N9300001097 1. Entity Name OAKVIEW ACRES OF FLAGLER COUNTY HOMEOWNER'S ASSOCIATION, INC.						02-14-2005 90052 016 ****61.25				
27 MAPLE STREET P.O.		Mailing Address P.O. BOX 277 FLAGLER BEACH, FL 32								
Principal Place of Business 3		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02092005	Chg-NP	CR2E037	(10/03)			
City & State		City & State			4. FEI Number 59-3295				optied For ot Applicable	
Zip	Country	Zip	Cou	intry	5. Certificate of	of Status Desired		8.75 Add ee Require		
	6. Name and Address of Current F	Registered Agent			7. Name and /	Address of New Re	gistered A	jent		
SHEFFIELD-RACHEL-E				Name						
				Street Addres	t Address (P.O. Box Number is Not Acceptable)					
:				City				Zip Code	e	
					FL zip code					
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agentature required when reinstating) DATE										
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2.1 The buy certainly that the information supplied with this hing does not quality for the exemption stated in Section 119.07(3)(f), Horida Statutes. I further certify that the information indicated on this report or suppliemental 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 seceiver 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 one an affactment withyan appress, with all other like ampowered.

SIGNATURE: Rachel Sheffield 2/9/05 386-439-8445