2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001221

FILED Feb 14, 2010 Secretary of State

Entity Name: ARBOR OAKS OF SARASOTA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

244 SHOPPING AVENUE 5077 FRUITVILLE RD.

PMB 200 SUITE 231

SARASOTA, FL 34237 US SARASOTA, FL 34232 US

Current Mailing Address: New Mailing Address:

244 SHOPPING AVENUE 5077 FRUITVILLE RD.

PMB 200 SUITE 231

SARASOTA, FL 34237 US SARASOTA, FL 34232 US

FEI Number: 65-0393729 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HAYES, ROBERT W 23 ARBOR OAKS DR

SARASOTA, FL 34232 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD

Name: HAYES, ROBERT W Address: 23 ARBOR OAKS DR. City-St-Zip: SARASOTA, FL 34232

Title: D

Name: ANGEL, MARGARET Address: 43 ARBOR OAKS DR. City-St-Zip: SARASOTA, FL 34232

Title: SD

Name: NEWMAN, MAHRA
Address: 47 ARBOR OAKS DR
City-St-Zip: SARASOTA, FL 34232

Title: TD

 Name:
 LEE, MARY L

 Address:
 36 ARBOR OAKS DR

 City-St-Zip:
 SARASOTA, FL 34232

Title: VPD

Name: AMORES, ELADIO
Address: 32 ARBOR OAKS DR
City-St-Zip: SARASOTA, FL 34232

Title:

Name: ALMOND, JOHN
Address: 71 ARBOR OAKS DR
City-St-Zip: SARASOTA, FL 34232

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: ROBERT W. HAYES PD 02/14/2010