2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001961

FILED Jan 28, 2008 Secretary of State

Entity Name: OAKPOINT HOMEOWNERS' ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 523 OAKPOINT CIRCLE 636 - OAKPOINT CIRCLE **DAVENPORT, FL 338378691 US** DAVENPORT, FL 338378691 US **Current Mailing Address: New Mailing Address:** PO BOX 825 LOUGHMAN, FL 33858 FEI Number: 59-3182290 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: VERNON, JACQUELINE L WHIPPLE, DEBRA L 523 OAKPOINT CIRCLE 115 - OAKPOINT PLACE **DAVENPORT, FL 338378691 US** DAVENPORT, FL 338378691 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: DEBRA L. WHIPPLE 01/28/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition HURST, MARC Name: Name: 207 OAKPOINT CIRCLE Address: Address: City-St-Zip: **DAVENPORT, FL 338378691 US** City-St-Zip: Title: () Delete Title: () Change () Addition Name: ACKERMAN, RICHARD Name: Address: 636 OAKPOINT CIRCLE Address: City-St-Zip: DAVENPORT, FL 338378691 City-St-Zip: Title: () Delete Title: (X) Change () Addition VERNON, JACQUELINE L HOWE, LESLIE Name: Name: 523 OAKPOINT CIRCLE Address: Address: 162 - BAYPOINT DRIVE City-St-Zip: DAVENPORT, FL 338378691 City-St-Zip: DAVENPORT, FL 338378691 Title: TD () Delete Title: () Change () Addition WHIPPLE, DEBRA Name: Name: Address: 115 OAKPOINT PLACE Address: City-St-Zip: DAVENPORT, FL 338378691 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEBRA L. WHIPPLE TD 01/28/2008