2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002391

FILED Feb 26, 2008 Secretary of State

Entity Name: OAKMONT TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.

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

C/O PETER FISKIO C/O SEAN MORAN

3205 OAKMONT MASON CIRCLE 3204 OAKMONT MASON CIRCLE

TAMPA, FL 33629 TAMPA, FL 33629

Current Mailing Address: New Mailing Address:

C/O PETER FISKIO C/O SEAN MORAN

3205 OAKMONT MASON CIRCLE 3204 OAKMONT MASON CIRCLE

TAMPA, FL 33629 TAMPA, FL 33629 US US

FEI Number: 59-3190470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FISKIO, PETER MORAN, SEAN

3205 OAKMONT MASON CIR. 3204 OAKMONT MASON CIR. TAMPA, FL 33629 TAMPA, FL 33629

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: SEAN MORAN 02/26/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FISKIO, PETER Name: MORAN, SEAN Name: 3205 OAKMONT MASON CIRCLE Address: 3204 OAKMONT MASON CIRCLE Address:

TAMPA, FL 33629 US City-St-Zip: TAMPA, FL 33629 US City-St-Zip:

Title: STD () Delete Title: PD (X) Change () Addition

MORAN, SEAN Name: SMITH, DANA Name: Address: 3204 OAKMONT MASON CIR Address:

3011A WEST MASON STREET City-St-Zip: TAMPA, FL 33629

TAMPA, FL 33629 City-St-Zip:

Title: VPD (X) Delete Title: () Change () Addition

SMITH, DANA Name: Name: 3011A WEST MASON STREET Address: Address: City-St-Zip: TAMPA, FL 33629 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: SEAN MORAN STD 02/26/2008