

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002093

FILED
Apr 06, 2010
Secretary of State

Entity Name: OAKLAND PARK RESIDENTIAL HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

419 NASH LN
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 0777
PORT ORANGE, FL 321290777

New Mailing Address:

FEI Number: 59-3238592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOX, ANNA M
419 NASH LANE
PORT ORANGE, FL 32127 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: FOX, ANNA M
Address: 419 NASH LANE
City-St-Zip: PORT ORANGE, FL 32127 US

Title: VPD
Name: ROCCO, PETER
Address: 6074 CENTRAL PARK BLVD.
City-St-Zip: PORT ORANGE, FL 32127 US

Title: SD
Name: WASHUTA, SHERI
Address: 6070 CENTRAL PARK BLVD.
City-St-Zip: PORT ORANGE, FL 32127 US

Title: TD
Name: PRATHER, BEVERLY
Address: 458 PENDREY DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

Title: D
Name: FRANZ, ROBERT
Address: 496 NEWTON ROAD
City-St-Zip: PORT ORANGE, FL 32127 US

Title: D
Name: GEBO, DAVID
Address: 443 PENDREY DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

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: ANNA M. FOX

PD

04/06/2010

Electronic Signature of Signing Officer or Director

Date