

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90146 006 ****61.25

DOCUMENT # N95000001406

1. Entity Name

OAKLEY HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7419 39TH COURT E
 SARASOTA FL 34243
 US

7419 39TH COURT E
 SARASOTA FL 34243
 US

2. Principal Place of Business

P.O. BOX 286

3. Mailing Address

P.O. BOX 286

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ELLENTON, FL

City & State

ELLENTON, FL

4. FEI Number

65-0658882

Applied For

Not Applicable

Zip

34222

Country

MANATEE

Zip

34222

Country

MANATEE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERUFF, CARLOS
 7419 39TH CT EAST
 SARASOTA FL 34243

7. Name and Address of New Registered Agent

Name *LUCRETIA KERN*
 Street Address (P.O. Box Number is Not Acceptable)
5810 30th Ct E
 City *ELLENTON, FL* Zip Code *34222*

8. 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

Lucretia Kern

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/8/02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Delete |
|-------|-----------------|----------------------|-------------------|-------------------------------------|
| PD | BERUFF, CARLOS | 7419 39TH COURT EAST | SARASOTA FL 34243 | <input checked="" type="checkbox"/> |
| D | MOUSE, CAROL | 7419 39TH COURT EAST | SARASOTA FL 34243 | <input checked="" type="checkbox"/> |
| D | WACHTLER, DONNA | 7419 39TH COURT EAST | SARASOTA FL 34243 | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Change | Addition |
|---------------------|-----------------|-----------------|--------------------|--------------------------|-------------------------------------|
| PRESIDENT, DIRECTOR | LUCRETIA KERN | 5810 30th Ct E | ELLENTON, FL 34222 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| SECRETARY, DIRECTOR | JOSEPH SCHOJAN | 5610 31st Cct E | ELLENTON, FL 34222 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| TREASURER, DIRECTOR | MARILYN CYCOTTE | 5803 30th Ct E | ELLENTON, FL 34222 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Lucretia Kern

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/8/02 (941) 721-0567

CR2E037 (9/01)