2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001406

FILED Jan 17, 2009 Secretary of State

Entity Name: OAKLEY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5703 31ST COURT EAST ELLENTON, FL 34222 **Current Mailing Address: New Mailing Address:** P.O. BOX 286 ELLENTON, FL 34222 US FEI Number: 65-0658882 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: SIWA, VICTOR 5811 31ST CT E ELLENTON, FL 34222 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition WOLKOWICZ, SHARON Name: Name: 5708 32ND ST Address: Address: City-St-Zip: ELLENTON, FL 34222 City-St-Zip: Title: Title: (X) Change () Addition () Delete WOLKOWICZ, RICHARD Name: WOLKOWICZ, RICHARD Name: Address: 5708 32ND ST Address: 5708 32ND ST City-St-Zip: ELLENTON, FL 34222 City-St-Zip: ELLENTON, FL 34222 Title: () Delete Title: (X) Change () Addition SEAGRAVES, MIKKI SEGRAVES, MIKKI Name: Name: Address: 3711 56TH AVE Address: 3711 56TH AVE. City-St-Zip: ELLENTON, FL 34222 City-St-Zip: ELLENTON, FL 34222 Title: () Delete Title: () Change () Addition Name: FOX, DEBRA-ANN E Name: 5703 31ST COURT EAST Address: Address: City-St-Zip: ELLENTON, FL 34222 City-St-Zip: Title: () Delete Title: () Change () Addition SIWA, VICTOR Name: Name: 5811 31ST COURT EAST Address: Address: City-St-Zip: ELLENTON, FL 34222 City-St-Zip: Title: () Delete Title: () Change () Addition MORELLI, VINCENT Name: Name: Address: 5515 31ST COURT E Address: ELLENTON, FL 34222 City-St-Zip: 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-ANN E. FOX T 01/17/2009