2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003090

FILED May 01, 2009 Secretary of State

Entity Name: THE OAKS AT BUSCH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8708 BUSCH OAK STREET TAMPA, FL 33617 **Current Mailing Address: New Mailing Address:** P.O. BOX 291194 TAMPA, FL 33687 US FEI Number: 59-3327675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PHILGELCE, MARSHA PETERS, RANDY 8745 BUSCH OAK STREET 8708 BUSCH OAK STREET TAMPA, FL 33617 TAMPA, FL 33617 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: RANDY L. PETERS 05/01/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CANNEDY, LEE Name: Name: Address: 8741 BUSCH OAKS STREET Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PETERS, RANDY Name: Address: 8708 BUSCH OAK STREET Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: DVP () Delete Title: () Change () Addition PHILGENCE, MARSH Name: Name: 8745 BUSCH OAK STREET Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: DS () Delete Title: () Change () Addition Name: BARNES, DEBORAH Name: 8746 BUSCH OAK ST. Address: Address: City-St-Zip: TAMPA, FL 33617 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: RANDY L. PETERS DP 05/01/2009