

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004872

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: OAK GROVE P.U.D. HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

2209 COLLIER PARKWAY  
141  
LAND O' LAKES, FL 34639 US

## New Principal Place of Business:

## Current Mailing Address:

2209 COLLIER PARKWAY  
141  
LAND O' LAKES, FL 34639 US

## New Mailing Address:

FEI Number: 59-3392567      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA, MICHELLE  
24416 KARNALI COURT  
LUTZ, FL 33559 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: PRES ( ) Delete  
Name: BAUGHN, APRIL  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

Title: TREA ( ) Delete  
Name: GARCIA, MICHELLE  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

Title: SEC ( ) Delete  
Name: LEWIS, LECIA  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

Title: DIR ( ) Delete  
Name: DILBERT, JOEL  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

Title: DIR ( ) Delete  
Name: SPRINGER, HEIDI  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

Title: DIR ( ) Delete  
Name: RAASH, DAVID  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR (X) Change ( ) Addition  
Name: ARMSTRONG, CARLA  
Address: 2209 COLLIER PARKWAY, SUITE 141  
City-St-Zip: LAND O' LAKES, FL 34639

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MICHELLE GARCIA

TREA

03/22/2009

Electronic Signature of Signing Officer or Director

Date