

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000188

FILED  
Mar 28, 2011  
Secretary of State

**Entity Name:** OAKLEIGH RESIDENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

500 NW 43RD ST  
3  
GAINESVILLE, FL 32607 US

**New Principal Place of Business:**

**Current Mailing Address:**

500 NW 43RD ST  
3  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

**FEI Number:** 59-3436668      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORNERSTONE PROPERTY SOLUTIONS OF N.C. FL  
500 NW 43RD STREET  
3  
GAINESVILLE, FL 32607 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: D  
Name: SPARROW, KENNY  
Address: 5745 SW 75TH ST #157  
City-St-Zip: GAINESVILLE, FL 32608

Title: P  
Name: ANDRISIN, JAMES G  
Address: 909 SW 126 ST  
City-St-Zip: NEWBERRY, FL 32669

Title: S  
Name: DEVRIES, ALBERT  
Address: 12410 SW 11 AVE  
City-St-Zip: NEWBERRY, FL 32669

Title: D  
Name: TILLMAN, CARLTON  
Address: 12214 500 11TH AVE  
City-St-Zip: NEWBERRY, FL 32669

Title: D  
Name: MIYASAKI, HELEN  
Address: 1018 SW 126TH STREET  
City-St-Zip: NEWBERRY, FL 32669

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: JAMES ANDRISIN

P

03/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date