

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000358

FILED
Feb 05, 2009
Secretary of State

Entity Name: WHITE OAK VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O 2400 SW 21 CIR
OCALA, FL 34471

New Principal Place of Business:

2716 SW 20TH AVE
OCALA, FL 34471

Current Mailing Address:

C/O 2400 SW 21 CIR
OCALA, FL 34471

New Mailing Address:

2716 SW 20TH AVE
OCALA, FL 34471

FEI Number: 59-3423955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER, DEBRA
2801 SW COLLEGE RD
UNIT 18
OCALA, FL 34474 US

Name and Address of New Registered Agent:

REDMAN, JOHN H DR.
2716 SW 20TH AVE
OCALA, FL 34471 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: JOHN REDMAN

02/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REHBEIN, CARL
Address: 1901 SW 28 ST
City-St-Zip: OCALA, FL 34471

Title: S () Delete
Name: REDMAN, JOHN
Address: 2716 SW 20 AVE
City-St-Zip: OCALA, FL 34471

Title: T () Delete
Name: AYERS, MATTHEW
Address: 2800 SW 20 AVE
City-St-Zip: OCALA, FL 34471

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REDMAN, JOHN H DR.
Address: 2716 SW 20TH AVE
City-St-Zip: OCALA, FL 34471 US

Title: S (X) Change () Addition
Name: BUZARD, GAIL MRS.
Address: 2801 SW 20TH AVE
City-St-Zip: OCALA, FL 34471 US

Title: T (X) Change () Addition
Name: BORRESEN, JERRY A MRS.
Address: 2819 SW 20 AVE
City-St-Zip: OCALA, FL 34471 US

Title: M () Change (X) Addition
Name: VANDERLAAN, KRISTOPHER MR.
Address: 1725 SW 27TH ST
City-St-Zip: OCALA, FL 34471 US

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: JOHN REDMAN

DR.

02/05/2009

Electronic Signature of Signing Officer or Director

Date