

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000724

FILED
Jun 14, 2005
Secretary of State

Entity Name: THE OAKS AT WOODLAND PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

752 AUTUMNCREST DR
SARASOTA, FL 34232

New Principal Place of Business:

2381 FRUITVILLE RD
SARASOTA, FL 34237

Current Mailing Address:

3974 TAMPA ROAD
B
OLDSMAR, FL 34677

New Mailing Address:

2381 FRUITVILLE RD
SARASOTA, FL 34237

FEI Number: 65-0938048 **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:

VAN HINLOOPEN, KAREL J
752 AUTUMNCREST DR
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

SPANGLER, STEPHEN D
2381 FRUITVILLE RD
SARASOTA, FL 34237 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: STEPHEN D. SPANGLER

06/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIVERTSON, KRIS W
Address: 766 STONECREST DR
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: CONNELLY, MARY ELLEN
Address: 740 CEDARCREST COURT
City-St-Zip: SARASOTA, FL 34237

Title: STD () Delete
Name: VAN HINLOOPEN LAB, KAREL
Address: 752 AUTUMNCREST DR
City-St-Zip: SARASOTA, FL 34232

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NILSEN, BETH A
Address: 795 SHORECREST DR
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Change () Addition
Name: SIVERTSON, KRIS
Address: 766 STONECREST DR
City-St-Zip: SARASOTA, FL 34237

Title: S (X) Change () Addition
Name: MILLER, RAY
Address: 742 AUTUMNCREST DR
City-St-Zip: SARASOTA, FL 34232

Title: T () Change (X) Addition
Name: MILLAR, GERRY
Address: 820 CEDARCREST CT.
City-St-Zip: SARAOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BETH NILSEN

P

06/14/2005

Electronic Signature of Signing Officer or Director

Date