2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State
05-02-2007 90070 012 ****61.25

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1. Entity Name
THE OAKHURST SHORES CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5973 OAKHURST DRIVE SEMINOLE, FL 33772 US	5973 OAKHURST DRIVE SEMINOLE, FL 33772 US

01142007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5431 Bayshore Dr.	5431 Bayshore Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Seminole FL	City & State: Seminole, FL
Zip: 33772 Country: US	Zip: 33772 Country: US

4. FEI Number: 59-3371226 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALABRESE, BRENDA F
5973 OAKHURST DRIVE
SEMINOLE, FL 33772

7. Name and Address of New Registered Agent

Name: Jill Foutz
Street Address (P.O. Box Number is Not Acceptable): 5431 Bayshore Dr.
City: Seminole FL Zip Code: 33772

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jill Foutz, Treasurer — Foutz — 4-27-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CALABRESE, BRENDA F 5973 OAKHURST DRIVE SEMINOLE, FL 33772	☐ Delete	T JILL FOUTZ 5431 Bayshore Dr. Seminole FL 33772	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CARLI, ROBERT 5899 HILLSIDE STREET SEMINOLE, FL 33772	☐ Delete	T Gary Vitucci 11515 Bayshore Dr. Seminole, FL 33772	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JACOBSON, JOHN 5451 OAKHURST DRIVE SEMINOLE, FL 33772	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T VITUCCI, JUDITH 11515 BAYSHORE DR. SEMINOLE, FL 33772	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Foutz, Jill Foutz treasurer 4-27-07 727-204-0863
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #