

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001123

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** CALDICOTT HOUSE AT OAK HARBOR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2501 27TH AVENUE, SUITE F-11  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 650429  
VERO BEACH, FL 32965

**New Mailing Address:**

**FEI Number:** 65-0711848

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RULE, LISA A  
2501 27TH AVENUE, SUITE F-11  
VERO BEACH, FL 32960 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: DV ( ) Delete  
Name: PITTS, BARBARA  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32960

Title: DS ( ) Delete  
Name: MCGRATH, KATHLEEN  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32960

Title: D ( ) Delete  
Name: ARCHER, DONNA  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32960

Title: M ( ) Delete  
Name: RULE, LISA  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32960

Title: DT ( ) Delete  
Name: RHOADS, JAY  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32960

Title: DP ( ) Delete  
Name: PLATT, ROBERT  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32960

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

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: LISA A RULE

M

04/27/2009

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

\_\_\_\_\_  
Date