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Jul 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthant Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000001536 (8)**

1. Corporation Name

OAKLAND PARK NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business 701 BEACH CT FT PIERCE FL 34950	Mailing Address 701 BEACH CT FT PIERCE FL 34950
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3. Date Incorporated or Qualified

03/14/1997

4. FEI Number

65-0745560

Applied For

Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BICHT, CHARLES L SR
701 BEACH CT
FT PIERCE FL 34950**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **CHARLES L. BICHT SR**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when relating)

DATE

3/15/98

12. OFFICERS AND DIRECTORS	
TITLE	SECRETARY <input checked="" type="checkbox"/> DELETE
NAME	MARINA MOORE
STREET ADDRESS	610 9TH ST.
CITY-ST-ZIP	FT. PIERCE FL 34950
TITLE	TREASURER <input checked="" type="checkbox"/> DELETE
NAME	MARY FREW
STREET ADDRESS	710 BEACH CT.
CITY-ST-ZIP	FT. PIERCE FL 34950
TITLE	VICE PRESIDENT <input type="checkbox"/> DELETE
NAME	JIM JONES
STREET ADDRESS	712 BEACH CT
CITY-ST-ZIP	FT. PIERCE FL 34950
TITLE	PRESIDENT <input type="checkbox"/> DELETE
NAME	CHARLES BICHT
STREET ADDRESS	701 BEACH CT
CITY-ST-ZIP	FT. PIERCE FL 34950
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BEVERLY NORTHRUP
1.3 STREET ADDRESS	706 8TH ST.
1.4 CITY-ST-ZIP	FT. PIERCE FL 34950
2.1 TITLE	TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BETTY BERGER
2.3 STREET ADDRESS	602 S 9TH
2.4 CITY-ST-ZIP	FT. PIERCE FL 34950
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE **CHARLES L. BICHT SR**

CP2E037 (10/97)