

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90119 048 ****61.25

DOCUMENT # N98000000732

1. Entity Name

OAKHURST PROFESSIONAL PARK PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

**1309 SE 25 LOOP
SUITE 103
OCALA FL 34471
US**

Mailing Address

**1309 SE 25 LOOP
SUITE 103
OCALA FL 34471
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3538510**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BARRINEAU, DIANE
1309 SE 25 LOOP
SUITE 103
OCALA FL 34471**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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	S DANIELS, JOHN P 1309 SE 25 LOOP, SUITE 102 OCALA FL 34471	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KIRKPATRICK, KENNETH 1320 SE 25 LOOP #101 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARRINEAU, REGINALD M 1309 SE 25 LOOP, SUITE 103 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARRINEAU, HAL 2100 SE 17 ST., STE 802 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY BERRY DEE DANIELS 1309 SE 25 LOOP #102 OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (10/02)

12. 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 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:

SIGNATURE REQUIRED

2/24/03

352-369-4000