

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006749

FILED
Mar 25, 2009
Secretary of State

Entity Name: OXFORD VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ANCHOR ASSOCIATES INC
3940 RADIO ROAD
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

ANCHOR ASSOCIATES INC
3940 RADIO ROAD
NAPLES, FL 34104

New Mailing Address:

FEI Number: 58-2430178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C/O ANCHOR ASSOCIATES, INC
3940 RADIO RD
NAPLES, FL 34104 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: STD () Delete
Name: KRUM, DOLORES
Address: 341 HARVARD CT.
City-St-Zip: NAPLES, FL 34104

Title: PD () Delete
Name: GAUSS, RONALD
Address: 360 HARVARD LANE
City-St-Zip: NAPLES, FL 34104

Title: VP () Delete
Name: TROWBRIDGE, DENNIS
Address: 366 HARVARD LANE
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: TROWBRIDGE, DENNIS
Address: 366 HARVARD LANE
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change () Addition
Name: SMITH, IVAN
Address: 321 HARVARD LANE
City-St-Zip: NAPLES, FL 34104

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: ROBERT NEIHEISEL

RA

03/25/2009

Electronic Signature of Signing Officer or Director

Date