

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N99000004111</b>	
1. Entity Name OAK PARK SEVEN ASSOCIATION, INC.	
Principal Place of Business 12168 94TH WAY N LARGO, FL 33773	Mailing Address 12168 94TH WAY N LARGO, FL 33773



02102008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3625253	Applied For Not Applicable
5. Certificate of Status Desired: <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  HIRSCHFIELD, STEVEN 12168 94TH WAY N LARGO, FL 33773
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**DO NOT WRITE  
IN THIS SPACE**

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

3/10/08

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution ☐

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRAIGHT, DENNIS 12147 94TH WAY N LARGO, FL 337734346
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIRSCHFIELD, PHILIP 12103 94TH WAY N LARGO, FL 337734346
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HIRSCHFIELD, STEVEN 12168 94TH WAY H LARGO, FL 33773
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04/03/08-80091-010 61.25

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/10/08