

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90080 048 ****61.25

DOCUMENT # N99000005222	
1. Entity Name	
OAK RUN HOMEOWNERS ASSOCIATION OF ZEPHYRHILLS, INC.	

Principal Place of Business	Mailing Address
37609 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541	37550 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/05)

4. FEI Number		Applied For
59-3669709		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required
☐		

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GOLDEN, ELLEN 37550 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when reconstituting) _____ **DATE** _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	TITLE	☐ Change ☒ Addition
NAME	NOFTLE, ROBERT	NAME	P Melvin Davis
STREET ADDRESS	37530 LAUREL HAMMOCK DR	STREET ADDRESS	35500 Laurel Hammock Dr.
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	CITY-ST-ZIP	Zephyrhills FL 33541
TITLE	DT	TITLE	☐ Change ☒ Addition
NAME	GOLDEN, ELLEN	NAME	P James Alderman
STREET ADDRESS	37550 LAUREL HAMMOCK DRIVE	STREET ADDRESS	37618 Laurel Hammock Dr.
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	CITY-ST-ZIP	Zephyrhills FL 33541
TITLE	DV	TITLE	☐ Change ☒ Addition
NAME	HULBERT, DONALD	NAME	VP Michael Twardosz
STREET ADDRESS	37600 LAUREL HAMMOCK DRIVE	STREET ADDRESS	37547 Laurel Hammock Dr.
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	CITY-ST-ZIP	Zephyrhills FL 33541
TITLE	S	TITLE	☐ Change ☒ Addition
NAME	NIEPOETTER, MELBA	NAME	D David Carroll
STREET ADDRESS	37516 LAUREL HAMMOCK DR	STREET ADDRESS	37505 Laurel Hammock Dr.
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	CITY-ST-ZIP	Zephyrhills FL 33541
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	WAGNER, MATTHEW	NAME	
STREET ADDRESS	7319 HIGHLAND LOOP	STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Ellen M. Golden 2/6/06 813 779-4495