2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2007 8:00 am
Secretary of State
01-26-2007 90036 043 ****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

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3669709 ☐ Applied For ☐ 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 _____
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
Due By May 1, 2007

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	P DAVIS, MELVIA 35500 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DX ← GOLDEN, ELLEN 37550 LAUREL HAMMOCK DRIVE ZEPHYRHILLS FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP TWARDOSZ, MICHAEL 37547 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	S NIEPOETTER, MELBA 37516 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DP ← CARROLL, DAVID 37508 LAUREL HAMMOCK DR ZEPHYRHILLS FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	~~Phyllis Carroll~~ ~~37508 Laurel Hammock~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	T Carroll, Phyllis 37508 Laurel Hammock Dr. Zephyrhills FL 33541 ☐ Change ☒ Addition

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 Ellen M Golden 1/19/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #