## **,2004 NOT-FOR-PROFIT CORPORATION** ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 26, 2004 8:00 am Secretary of State **DOCUMENT # 744824** 1. Entity Name 02-26-2004 90007 007 \*\*\*\*70.00 OAK LAKE PARK II, INC., A CONDOMINIUM Principal Place of Business Mailing Address 1960 UNION STREET 1960 UNION STREET BOX 44 CLEARWATER FL 33763 CLEARWATER FL 33763 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-1884795 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MONICA-M. FERRY WILSON, KERRI Street Address (P.O. Box Number is Not Acceptable) 1960 UNION ST. **APT 31** 1060 UNION ST. APT CLEARWATER FL 33763 CCOARCHARDR 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 ager SIGNATURE Signature, typed or printed name of registered agent and title if applicable. OTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD TITLE Delete TITLE ☐ Change X Addition BUHLERT, NANCY STEVEN M. FERRY 1960 UNION ST APT 28 NAME NAME 1960 UNION ST APT 35 STREET ADDRESS STREET ADDRESS CLEARWATER FL 33763 CLEARWATER , FL 33763 CITY-ST-7IP CITY-ST-ZIP TITLE 🛛 Delete TITLE Change Addition WILSON, KERRI NAME NAME MONICA M. FERCEY 1960 UNION ST APT 31 STREET ADDRESS STREET ADDRESS 1960 UNION ST. CLEARWATER FL 33763 CITY - ST- ZIP CITY-ST-ZIP CLOARWATER VD VD中海生活到 Delete Addition TITLE Change TITLE JABLONSKI, JANICE ALLI LUNDON NAME NÁMÉ 1960 UNION ST APT 29 STREET ADDRESS 960 UNION ST # 30 STREET ADDRESS CLEARWATER FL 33763 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER 33763 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete 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 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 other like empowered.

FILED