

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 750250 (3)

1. Corporation Name

OAKHURST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

4255 OAKHURST CIRCLE EAST  
SARASOTA FL 34233

4255 OAKHURST CIRCLE EAST  
SARASOTA FL 34233

3. Date Incorporated or Qualified 12/18/1979  
3a. Date of Last Report 04/19/1995

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-2093754		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		25	
Zip		Country		29		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BECKER & POLIAKOFF  
630 S. ORANGE AVENUE  
THIRD FLOOR  
SARASOTA FL 33578

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	VP/D
NAME	BENNETT, MARIE	12 NAME	Bob Eakin (Eakin, Bob)
STREET ADDRESS	4249 OAK HURST CIRCLE, E	13 STREET ADDRESS	4260 OAKHURST CIR, E.
CITY-ST-ZIP	SARASOTA FL	14 CITY-ST-ZIP	SARASOTA FL 34233
TITLE	TD	21 TITLE	P/D
NAME	DUNN, FRANK J	22 NAME	Dunn, Frank J.
STREET ADDRESS	4135 OAK HURST CIRCLE, W	23 STREET ADDRESS	4135 OAK HURST CIR, W
CITY-ST-ZIP	SARASOTA FL	24 CITY-ST-ZIP	SARASOTA FL 34233
TITLE	D	31 TITLE	S/D
NAME	DUNN, FRANK	32 NAME	QUEEN, LAURA D.
STREET ADDRESS	4135 OAKHURST CIRCLE WEST	33 STREET ADDRESS	4050 OAKHURST DR.
CITY-ST-ZIP	SARASOTA FL	34 CITY-ST-ZIP	SARASOTA FL 34233
TITLE	SD	41 TITLE	T/D
NAME	MCQUEEN, J. W.	42 NAME	LUCHESE, RICHARD
STREET ADDRESS	3911 OAKHURST BLVD	43 STREET ADDRESS	4221 OAKHURST CIR, E
CITY-ST-ZIP	SARASOTA FL	44 CITY-ST-ZIP	SARASOTA FL 34233
TITLE	VD	51 TITLE	C/D
NAME	OLSEN, GEORGE	52 NAME	MINOR, GINNY
STREET ADDRESS	4282 OAK HURST CIRCLE EAST	53 STREET ADDRESS	4079 OAKHURST DR.
CITY-ST-ZIP	SARASOTA FL	54 CITY-ST-ZIP	SARASOTA FL 34233
TITLE	D	61 TITLE	C/D
NAME	FULLER, RICHARD	62 NAME	ROLAND, HILDE
STREET ADDRESS	4021 OAK HURST DRIVEE	63 STREET ADDRESS	3932 OAKHURST BLVD.
CITY-ST-ZIP	SARASOTA FL	64 CITY-ST-ZIP	SARASOTA FL 34233

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Laura D. Queen (Secy.) LAURA D. QUEEN 3/1/96 941-378-2313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)