

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 761955 (4)

1. Corporation Name  
OAK CREST/ACORN RESIDENTS' CLUB, INC.



Principal Place of Business: 9925 ULMERTON RD. #460 580 LARGO FL 34641 US  
Mailing Address: 9925 ULMERTON RD. #460 580 LARGO FL 34641 US

3. Date Incorporated or Qualified: 02/12/1982  
3a. Date of Last Report: 01/30/1995

2. Principal Place of Business: 21 Suite, Apt. #, etc. #460  
22 City & State  
23 Zip Country  
24 25  
2a. Mailing Address: 26 Suite, Apt. #, etc. #460  
27 City & State  
28 Zip Country  
29 30  
4. FFI Number: 59-2288746  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: MCLANE, THEODORE F. 251 N CLEARWATER-LARGO ROAD LARGO FL  
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code FL

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when re-appointing) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: <del>GRUMB, JOYCE</del>	11 TITLE:	CABELL, WILLIAM
STREET ADDRESS: 9925 ULMERTON RD. #460	CITY-ST-ZIP: LARGO FL	12 NAME:	#460
TITLE: VD	NAME: <del>QUINTA, DORIS</del>	13 STREET ADDRESS:	
STREET ADDRESS: 9925 ULMERTON RD., #253	CITY-ST-ZIP: LARGO FL	14 CITY-ST-ZIP:	
TITLE: VD	NAME: <del>MORGAN, VIVIAN</del>	21 TITLE:	KENNEL, MARY
STREET ADDRESS: 9925 ULMERTON ROAD #253	CITY-ST-ZIP: LARGO FL	22 NAME:	#207
TITLE: S	NAME: <del>CARTER, GALEY</del>	23 STREET ADDRESS:	
STREET ADDRESS: 9925 ULMERTON RD. #460	CITY-ST-ZIP: LARGO FL	24 CITY-ST-ZIP:	
TITLE: T	NAME: CALHOUN, JOHN	31 TITLE:	WOOD, GAIL
STREET ADDRESS: 435 16TH AVE SE, #802	CITY-ST-ZIP: LARGO FL	32 NAME:	
TITLE:	NAME:	33 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	34 CITY-ST-ZIP:	
TITLE:	NAME:	41 TITLE:	FERGUSON, MARY ANN
STREET ADDRESS:	CITY-ST-ZIP:	42 NAME:	#180
TITLE:	NAME:	43 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	44 CITY-ST-ZIP:	
TITLE:	NAME:	51 TITLE:	O'GRADY, MARY
STREET ADDRESS:	CITY-ST-ZIP:	52 NAME:	#580
TITLE:	NAME:	53 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	54 CITY-ST-ZIP:	
TITLE:	NAME:	61 TITLE:	
STREET ADDRESS:	CITY-ST-ZIP:	62 NAME:	
TITLE:	NAME:	63 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	64 CITY-ST-ZIP:	

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: Wm. Cabell Wm. Cabell, President 581-6388

CR2E037 (12/95)