

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2005 08:00 AM
Secretary of State

DOCUMENT # N00000003068
 1. Entity Name
 OAK BLUFF OF DAYTONA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business — Mailing Address
 1037 NORTH HALIFAX 1037 NORTH HALIFAX
 ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32176



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03022005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3690388 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BUCKLEY, DENNIS
 1037 NORTH HALIFAX
 ORMOND BEACH, FL 32176

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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 re-filing) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BUCKLEY, DENNIS
STREET ADDRESS	735 N ATLANTIC AVE
CITY-ST-ZIP	DAYTONA BEACH, FL 32118
TITLE	D
NAME	ANDERSON, GEORGE
STREET ADDRESS	326 N ATLANTIC AVE
CITY-ST-ZIP	DAYTONA BEACH, FL 32118
TITLE	D
NAME	HOPKINS, JOSEPH H
STREET ADDRESS	140 S BEACH ST., STE. 306
CITY-ST-ZIP	DAYTONA BEACH, FL 32118
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 address, with all other like empowered.

SIGNATURE: *Dennis M. Buckley* 03-10-05 386-441-3630
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #