

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003533

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** OAKLEYS MUD RIVER SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5322 FELKER DR  
WEEKI WACHEE, FL 34607

**New Principal Place of Business:**

**Current Mailing Address:**

5322 FELKER DR  
WEEKI WACHEE, FL 34607

**New Mailing Address:**

FEI Number: 56-2399615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOBBY, H. CLYDE  
5709 TIDALWAVE DR  
NEW PORT RICHEY, FL 34652 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CHARLES, SHEILA H  
Address: 5322 FELKER DR  
City-St-Zip: WEEKI WACHEE, FL 34607

Title: DV  
Name: BELL, ALICE B  
Address: 5340 FELKER DR  
City-St-Zip: WEEKI WACHEE, FL 34607

Title: DS  
Name: WOODCOCK, NELL M  
Address: 5250 FELKER DR  
City-St-Zip: WEEKI WACHEE, FL 34607

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHEILA H CHARLES

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02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date