

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005294

FILED
Mar 08, 2007
Secretary of State

Entity Name: OAKFORD ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

200 LAKE MORTON DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

5646 FISCHER DRIVE
LAKELAND, FL 33812

New Mailing Address:

5464 OAKFORD DR.
LAKELAND, FL 33812

FEI Number: 32-0109289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, E. SNOW JR.
200 LAKE MORTON DRIVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

MALEK, DANIEL M
5464 OAKFORD DR.
LAKELAND, FL 33812 US

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: DANIEL M. MALEK

03/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BAGGOTT, GERRI
Address: 5646 FISCHER DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: DV () Delete
Name: MALEK, DANIEL
Address: 5464 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: SD () Delete
Name: JOHNSON, ANDREA
Address: 5643 FISCHER DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: TD () Delete
Name: WILKINSON, BRENDA
Address: 5598 FISCHER DR
City-St-Zip: LAKELAND, FL 33812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MALEK, DANIEL
Address: 5464 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: DV (X) Change () Addition
Name: FENNER, STEPHANIE
Address: 5470 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: TD (X) Change () Addition
Name: WILKINSON, BRENDA
Address: 5598 FISCHER DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: CD (X) Change () Addition
Name: JAMES, DELP
Address: 5518 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DANIEL M. MALEK

PD

03/08/2007

Electronic Signature of Signing Officer or Director

Date