

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005294

FILED
Apr 27, 2009
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:

5446 OAKFORD DR
LAKELAND, FL 33812

New Mailing Address:

FEI Number: 32-0109289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUMMEL, BEAU
5446 OAKFORD DR.
LAKELAND, FL 33812 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: PD () Delete
Name: HUMMEL, BEAU
Address: 5446 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: DV () Delete
Name: LOPIPERO, TOM
Address: 5440 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

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

Title: SD () Delete
Name: LAGASSE, ERICA
Address: 5445 OAKFORD DRIVE
City-St-Zip: LAKELAND, FL 33812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRENDA WILKINSON

TD

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date