2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04034

FILED Aug 01, 2005 Secretary of State

Entity Name: THE OAKS III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

19505 QUESADA AVE PT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

19505 QUESADA AVE PT CHARLOTTE, FL 33948

FEI Number: 59-2416983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DAVIES, CHRISTOPHER N 12601 WORLD PLAZA LN STE 2 FORT MYERS, FL 33907

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DENNIS, JONES YOCUM, NANCY Name: Name: 781 HILLSDALE CRESCENT Address: 12 AHRENS PLACE Address: City-St-Zip: SUDBURY, CANADA, ON P3E 3S7 City-St-Zip: FREDONIA, NY 14063

(X) Change () Addition Title: DV () Delete Title:

BAKER, DONALD Name: WILLIAMS, JACK Name: Address: 3052 BRIXTON DR E Address: 1589 HOLLISTER ROAD City-St-Zip: SPRINGFIELD, OH 45503 City-St-Zip: OWEGO, NY 13827

Title: DP () Delete Title: () Change () Addition

DEEVERS, CHRIS P Name: Name: Address: 2256 FROST RD Address: City-St-Zip: STREETSBORO, OH 44241 City-St-Zip:

(X) Change () Addition Title: DS () Delete Title: DS MARSEE, FRED

Name: Name: OSBORNE, PETER Address: 19505 QUESADA AVE Address: 3406-3 MASSEY SQUARE

City-St-Zip: PORT CHARLOTTE, FL 33948 City-St-Zip: TORONTO, ONTARIO, CN M4C 5L5

Title: () Delete Title: (X) Change () Addition

RIEBEN, KENNETH JARBOE, RAY Name: Name:

3376 GRASSMERE DRIVE 102 SUNRAY TERRACE Address: Address: City-St-Zip: ORISKANY, NY 13424 City-St-Zip: LEXINGTON, KY 40503

I hereby certify that the information supplied with this filing does not qualify for the 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 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: AMANDA PERTUCH, ADMIN. ASST. A.A. 08/01/2005