

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04034

FILED
Feb 10, 2009
Secretary of State

Entity Name: THE OAKS III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19505 QUESADA AVE
PT CHARLOTTE, FL 33948

New Principal Place of Business:

Current Mailing Address:

19505 QUESADA AVE
PT CHARLOTTE, FL 33948

New Mailing Address:

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

Name and Address of Current Registered Agent:

DAVIES, CHRISTOPHER N
2375 TAMIAMI TRAIL
NAPLES, FL 34103 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: DT () Delete
Name: YOCUM, NANCY
Address: 12 AHRENS PLACE
City-St-Zip: FREDONIA, NY 14063

Title: DP () Delete
Name: WILLIAMS, JACK
Address: 1589 HOLLISTER ROAD
City-St-Zip: OWEGO, NY 13827

Title: DS () Delete
Name: KUSS, FRED
Address: 19505 QUESADA AVE T101
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: DV () Delete
Name: HUNT, DUWAIN
Address: 19505 QUESADA AVE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: JARBOE, RAY
Address: 3376 GRASSMERE DRIVE
City-St-Zip: LEXINGTON, KY 40503

Title: D (X) Delete
Name: OLEYAR, PAUL
Address: 8397 NOBLE LOON STREET NW
City-St-Zip: MASSILLON, OH 44646

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HUNT, DUWAIN
Address: 19505 QUESADA AVENUE K102
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP (X) Change () Addition
Name: OLEYAR, PAUL
Address: 8397 NOBLE LOON ST NW
City-St-Zip: MASSILLON, OH 44645

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

Title: DT (X) Change () Addition
Name: ZOERNER, ROBERT
Address: 68778 TWILIGHT STREET
City-St-Zip: EDWARDSBURG, MI 49112

Title: DL (X) Change () Addition
Name: LEONARD, FRANK
Address: 217 WILDERNESS WAY
City-St-Zip: MONETA, VA 24121

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: DUWAIN HUNT

Electronic Signature of Signing Officer or Director

PRES

02/10/2009

_____ Date