

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 25, 2011
Secretary of State**

DOCUMENT# N05000006704

Entity Name: THE OAKS BUSINESS CENTER CONDOMINIUM OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**141, 145, 150 HILDEN RD.
PONTE VEDRA, FL 32081**New Principal Place of Business:****Current Mailing Address:**8411 BAYMEADOWS WAY
SUITE 3
JACKSONVILLE, FL 32256**New Mailing Address:****FEI Number:** 20-5413194**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FERNANDEZ, JOSE L
150 HILDEN RD.
UNIT 308
PONTE VEDRA, FL 32081 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:** PRES
Name: MARCO, FORTINI
Address: 141 HILDEN ROAD, UNIT 316
City-St-Zip: PONTE VEDRA, FL 32081**Title:** VP
Name: CATE, DICARLO
Address: 150 HILDEN ROAD, UNIT 104
City-St-Zip: PONTE VEDRA, FL 32081**Title:** S
Name: MARY, SOHA
Address: 150 HILDEN ROAD, SUITE 101
City-St-Zip: PONTE VEDRA, FL 32081**Title:** T
Name: FERNANDEZ, JOSE L
Address: 150 HILDEN ROAD, SUITE 308
City-St-Zip: PONTE VEDRA, FL 32081**Title:** ALT
Name: MIKE, MASS
Address: 141 HILDEN RD. UNIT 120
City-St-Zip: PONTE VEDRA, FL 32081

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: KARI RAGER

PM

10/25/2011

Electronic Signature of Signing Officer or Director

Date