

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012982

FILED
Apr 24, 2008
Secretary of State

Entity Name: OAKBROOK COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2293 W. EAU GALLIE BLVD.
MELBOURNE, FL 32395

New Principal Place of Business:

882 JACKSON AVE
WINTER PARK, FL 32789

Current Mailing Address:

2293 W. EAU GALLIE BLVD.
MELBOURNE, FL 33071

New Mailing Address:

882 JACKSON AVE
WINTER PARK, FL 32789

FEI Number: 20-4208981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FADIL, RICHARD
2293 W. EAU GALLIE BLVD.
MELBOURNE, FL 32395 US

Name and Address of New Registered Agent:

JORDAN, BRETT M
882 JACKSON AVE
WINTER PARK, FL 32789 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: BRETT M. JORDAN

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ASHY, MARY
Address: 2293 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32395

Title: DST () Delete
Name: FADIL, RICHARD
Address: 2293 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32395

Title: DVP () Delete
Name: GLUCKMAN, NICOLAS
Address: 825 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: HALKOVIC, KRISTY
Address: 2293 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32395

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: MARY ASHY

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date