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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

OAKBROOK PROPERTY OWNERS! ASSOCIATION, INC.

| Principal Plac | ce of Busines | | | lling Address | | | | | | | | | |
|--|---|--|--|---|---|--|---|------------------------|--|--|------------------------------|-------------------------|---|
| | | | | walling Address | | | | | | | | | |
| 3290 KINGS ROAD SOUTH ST. AUGUSTINE FL 32086 | | | |) KINGS ROAD SOL AUGUSTINE FL 320 | | | | | 3. Date Incorp. 07/06/ | | ied | • | |
| | | | | | | | | ł | 4. FEI Number | 1300 | | | Applied For |
| | | | | | | | | l | | APPLICABLE | • | | Not Applicable |
| 2. Principal Place of Business | | | 2a. l | 2a. Mailing Address | | | | | | | | \$8.7 | 5 Additional |
| 21 | | | 26 | 26 | | | | | 5. Certificate of | f Status Desired | . 🗀 | • | Required |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | 6. Election Can | npaign Financin | ıg | | 0 May Be |
| 22 | | | 27 | 27 | | | | | Trust Fund C | Contribution | | | d to Fees |
| Clty & Stat | te | | (| City & State | | | | | 7. Is this nonpr | ofit corporation | a homeowne | ers associa | ation? |
| 23 | | | 28 | | | | | | | 10.10 | | □ No | |
| Zip | | Country | — — | Zip | - | Country | | | 8. This corpora | tion owes or ha | s paid the cu | ırrent year | |
| 24 | | 25 | 29 | | 30 | _p | | | | perty Tax due J | | Yes | 25 7/0 |
| | 9. Name | and Address of Curre | ent Registe | red Agent | | 24 | | | 10. Name and A | Address of New | / Registered | Agent | |
| 5.14.5. | | _ | | | | 81 | Name | | | | | | |
| Bailey, John D Jr. 780 North Ponce de Leon Blvd. | | | | | | | Street . | Addres | s (P.O. Box Num | ber is Not Acce | ptable) | | |
| ST. AUG | GUSTINE FL | . 32084 | | | | 83 | | | | | | | |
| | | | | | | 84 | City | | | | FL | 85 Z | ip Code |
| 11. Pursuant office or r agent. I a | to the provisi registered aga am familiar wit | ons of Sections 617.05 ent, or both, in the Stat th, and accept the obli | 02 and 617 te of Florida gations of, | 7.1508, Florida Sta L. Such change wa Section 617.0503, | tutes, the s author Florida S | e above rized by Statutes | -named the corp | corpore | ation submits this 's board of direct | statement for to tors. I hereby ac | he purpose o ocept the ap | of changin pointment | g its registered as registered |
| SIGNATURE | | | | | | | | | | | | | |
| | 01 | | | | | | | | | | | | |
| | Signature, typed | or printed name of registered as | | | OTE: Regis | stered Ager | nt signature | required v | vhen reinstating) | | DATE | | |
| 12. | | or printed name of registered as OFFICERS At | | ORS | | 13. | nt signature | - | ADDITIONS/C | HANGES TO O | FFICERS AN | | |
| 12. TITLE | S | OFFICERS A | | | 1 | 13. 1,1 TITLE | nt signature | - | ADDITIONS/C | | FFICERS AN | D DIRECT | |
| 12. TITLE NAME | S HELD, LO | OFFICERS AT | | ORS | 1 1 | 13. 1.1 TITLE 1.2 NAME | | DIT! | ADDITIONS/C | rchez rdywine | Court | | |
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 for trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, grain an attachment with an address.

REQUIRED

SIGNATURE:

- 1/28/98

FILED

Feb 06 1998 8:00am

Secretary of State