

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28289

**FILED**  
**Feb 09, 2015**  
**Secretary of State**  
**CC5094253266**

**Entity Name:** OAKHILL FARMS, UNIT II HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1064 GREEN HILL TRACE  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

1064 GREEN HILL TRACE  
TALLAHASSEE, FL 32317 US

**FEI Number:** 65-0250023

**Certificate of Status Desired:** No

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

COPELAND, ROBERT T  
1064 GREEN HILL TRACE  
TALLAHASSEE, FL 32317 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:** ROBERT COPELAND

02/09/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name COPELAND, ROBERT  
Address 1064 GREEN HILL TRACE  
City-State-Zip: TALLAHASSEE FL 32317

Title VD  
Name SMITHA, BRIDGET  
Address 11562 BUCK LAKE ROAD  
City-State-Zip: TALLAHASSEE FL 32317

Title TD  
Name WILLIAMS, GARY  
Address 1040 CANARVON DR.  
City-State-Zip: TALLAHASSEE FL 32317

Title SD  
Name COPELAND, JULIE  
Address 1064 GREEN HILL TRACE  
City-State-Zip: TALLAHASSEE FL 32317

*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:** JULIE COPELAND

**SECRETARY**

02/09/2015

Electronic Signature of Signing Officer/Director Detail

Date