

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N32702

FILED
Sep 05, 2002
Secretary of State

Entity Name: THE OAKS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O LEE DANDO
101 RIVERVIEW TERR
E PALATKA, FL 32131

New Principal Place of Business:

Current Mailing Address:

C/O LEE DANDO
101 RIVERVIEW TERR
E. PALATKA, FL 32131

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PICKENS, JOE H.
113 N. 4TH STREET
PALATKA, FL 32077

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: P () Delete
Name: TAYLOR, LARRY
Address: 124 RIVERSEDGE DR
City-St-Zip: EAST PALATKA, FL

Title: STD () Delete
Name: DANDO, LEE,
Address: ROUTE 1, BOX 448-H
City-St-Zip: EAST PALATKA, FL

Title: D () Delete
Name: HUDSON, LUCY
Address: RT 1 BOX 449-A
City-St-Zip: EAST PALATKA, FL

Title: D () Delete
Name: CARR, H.M.
Address: 107 WATEROAK CT
City-St-Zip: EAST PLATKA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: DANDO, LEE,
Address: 101 RIVERVIEW TERRACE
City-St-Zip: EAST PALATKA, FL

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEE DANDO

STD

09/05/2002

Electronic Signature of Signing Officer or Director

Date