

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 Sep 10, 1999 8:00 am
 Secretary of State

09-10-1999 90008 015 ****61.25

DOCUMENT # N37079

Corporation Name
 OAK WOODLANDS PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business
 RT. 1, BOX 600
 JENNINGS FL 32053

Mailing Address
 RT. 2, BOX 600
 JENNINGS FL 32053

614166-90008-15



1. Principal Place of Business 4010 NW 21 st Circle		2a. Mailing Address 26 4010 NW 21 st Circle		3. Date Incorporated or Qualified 03/05/1990	
Suite, Apt. #, etc. JENNINGS, FLORIDA		Suite, Apt. #, etc.		4. FEI Number 59-3086232	
City & State JENNINGS, FLORIDA		City & State 28 JENNINGS, FLORIDA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32053		Country 25 U.S.A.		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Country 29 32053		Country 30 U.S.A.	

9. Name and Address of Current Registered Agent RATLIFF, RONALD H RT. 2 BOX 141A JASPER FL 32052				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
				FL		85 Zip Code	

I, Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Ronald H. Ratliff* (NOTE: Registered Agent signature required when reinstating) DATE: 9/7/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE	PD RATLIFF, RONALD ROUTE 2 BOX 141A JASPER FL	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
ME	D MOODY, JAMES M RT. 2 BOX 600 JENNINGS FL 32053	<input type="checkbox"/> DELETE	1.2 NAME
REET ADDRESS			1.3 STREET ADDRESS
Y-ST-ZIP			1.4 CITY-ST-ZIP
LE	D AUTREY, WALTER G III RT. 2 BOX 4310 JENNINGS FL 32053	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
ME			2.2 NAME
REET ADDRESS			2.3 STREET ADDRESS
Y-ST-ZIP			2.4 CITY-ST-ZIP
LE		<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
ME			3.2 NAME
REET ADDRESS			3.3 STREET ADDRESS
Y-ST-ZIP			3.4 CITY-ST-ZIP
LE		<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
ME			4.2 NAME
REET ADDRESS			4.3 STREET ADDRESS
Y-ST-ZIP			4.4 CITY-ST-ZIP
LE		<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
ME			5.2 NAME
REET ADDRESS			5.3 STREET ADDRESS
Y-ST-ZIP			5.4 CITY-ST-ZIP
LE		<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
ME			6.2 NAME
REET ADDRESS			6.3 STREET ADDRESS
Y-ST-ZIP			6.4 CITY-ST-ZIP

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 or 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald H. Ratliff* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: RONALD H. RATLIFF DATE: 9/7/99 Daytime Phone #: 904-938-1300

11/18/97

CR2E037 (5/99)