

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90165 001 ****61.25

DOCUMENT # N38761

1. Entity Name
OAKBRIDGE OWNERS' ASSOCIATION NO. TWO, INC.



Principal Place of Business
**3604 HARDEN BLVD.
LAKELAND FL 33803
US**

Mailing Address
**3604 HARDEN BLVD.
LAKELAND FL 33803
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3036752**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BARBER, RICHARD W
3604 HARDEN BLVD.
LAKELAND FL 33803**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
VD	MARLOW, MARK L.	1950 STONEGATE DR. SUITE 150	VESTAVIA HILLS AL				
SD	LONG, WILLIAM B	530 BEACON PKWY W.	BIRMINGHAM AL				
PD	BARBER, RICHARD W	3604 HARDEN BLVD.	LAKELAND FL				
T	TORRES, FRANCISCO	3604 HARDEN BLVD	LAKELAND FL 33803				

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE: Richard Barber 1/13/03 663-647-1100 X223

CR2E037 (10/02)