

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90093 028 \*\*\*\*61.25



**DOCUMENT # N42101**  
 1. Entity Name  
**OAKBROOKE ESTATES HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business: **7512 OAKBROOK DR ZEPHRYHILLS FL 33540 US**  
 Mailing Address: **7512 OAKBROOK DR ZEPHRYHILLS FL 33540 US**



2. Principal Place of Business: Suite, Apt. #, etc.  
 3. Mailing Address: Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State: \_\_\_\_\_  
 Zip: \_\_\_\_\_ Country: \_\_\_\_\_

4. FEI Number: **NO-T APPLICABLE**  
 Applied For: \_\_\_\_\_  
 Not Applicable: \_\_\_\_\_  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**BARNETT, DALE**  
**OAK BROOK ESTATES**  
**ZEPHRYHILLS FL 33540**

7. Name and Address of New Registered Agent  
 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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

TITLE	PSD	<input type="checkbox"/> Delete
NAME	BARNETT, DALE	
STREET ADDRESS	OAKBROOK ESTATES	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540	
TITLE	D	<input type="checkbox"/> Delete
NAME	HEYL, FRED	
STREET ADDRESS	7578 OAKBROOK DR	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LANE, MARSHA	
STREET ADDRESS	7524 OAKBROOK DR	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540	
TITLE	D	<input type="checkbox"/> Delete
NAME	GENNARO, CARL JR.	
STREET ADDRESS	7550 OAKBROOK DR	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540	
TITLE	DT	<input type="checkbox"/> Delete
NAME	STUTT, DAVID	
STREET ADDRESS	7512 OAKBROOK DRIVE	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540	
TITLE	D	<input type="checkbox"/> Delete
NAME	POE, BILLY	
STREET ADDRESS	OAKBROOK ESTATES	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLES MANNING	
STREET ADDRESS	7524 OAKBROOK DR	
CITY-ST-ZIP	ZEPHRYHILLS, FL 33540	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *David D. Stutt*

JAN 26 2006 813-788-1064