

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

0056763

DOCUMENT # N42101

1. Entity Name

OAKBROOKE ESTATES HOMEOWNERS ASSOCIATION, INC.

02-01-2001 90108 050 ****61.25

Principal Place of Business

Mailing Address

7512 OAKBROOK DR
 ZEPHYRHILLS FL 33540
 US

7512 OAKBROOK DR
 ZEPHYRHILLS FL 33540
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

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

HEYL, FRED
 7578 OAKBROOK BRIDGE
 ZEPHYRHILLS FL 33540

Name **ODOM, JOHN**
 Street Address (P.O. Box Number is Not Acceptable)

7524 OAK BROOK DR

City **ZEPHYRHILLS** FL Zip Code **33540**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW:
 FEES IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PSD	<input type="checkbox"/> Delete
NAME	ODOM, JOHN	
STREET ADDRESS	7524 OAKBROOK DR	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HEYL, FRED	
STREET ADDRESS	7578 OAKBROOK DR	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARNETT, BEVERLY	
STREET ADDRESS	5912 7TH STREET	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHUANCY, GERRI	
STREET ADDRESS	7536 OAKBROOK DR	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	STUTT, DAVID	
STREET ADDRESS	7512 OAKBROOK DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540	
TITLE	D	<input type="checkbox"/> Delete
NAME	GENNARO, CARL JR	
STREET ADDRESS	7578 OAKBROOK DR	
CITY-ST-ZIP	ZEPHYRHILLS FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/01 813-788-1064
 Date Daytime Phone #

CR2E037 (10/00)