

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45998

**FILED**  
**Mar 02, 2012**  
**Secretary of State**

**Entity Name:** OAK LEAFE OF HIGHLANDS COUNTY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6048 OAK LEAFE CIRCLE  
SEBRING, FL 33876 US

**New Principal Place of Business:**

**Current Mailing Address:**

6048 OAK LEAFE CIRCLE  
SEBRING, FL 33876 US

**New Mailing Address:**

**FEI Number:** 58-1967362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CEBULA, MARY  
6048 OAK LEAFE CIRCLE  
SEBRING, FL 33876 US

**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: D  
Name: HOOVER, LINDA  
Address: 6030 OAK LEAFE CIRCLE  
City-St-Zip: SEBRING, FL 33876

Title: P/D  
Name: CEBULA, PETER P  
Address: 6048 OAK LEAFE CIRCLE  
City-St-Zip: SEBRING, FL 33876

Title: S/D  
Name: SHATNEY, REBECCA  
Address: 6196 OAK LEAFE CIRCLE  
City-St-Zip: SEBRING, FL 33876

Title: T/D  
Name: CEBULA, MARY K  
Address: 6048 OAK LEAFE CIRCLE  
City-St-Zip: SEBRING, FL 33876

Title: VP/D  
Name: SHATNEY, PATRICK T  
Address: 6196 OAK LEAFE CIRCLE  
City-St-Zip: SEBRING, FL 33876

I hereby 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 all other like empowered.

SIGNATURE: PETER P. CEBULA

P/D

03/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date