2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2000 8:00 am
Secretary of State
02-20-2000 90045 049 ****61.25

DOCUMENT # N48358

1. Entity Name

OAK FOREST ESTATES PROPERTY OWNERS ASSOCIATION,

812852

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
RICH THURMAN 5550 W STATE STREET HOMSASSA FL 34446 US	P.O. BOX 3743 HOMOSASSA FL 34447-3743 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3162152 ☐ Applied For ☐ Not Applicable

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
RICH, THURMAN 5550 W STATE STREET HOMOSASSA FL 34446	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.

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

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DT JONES, JERRY 5362 W ROCHELLE STREET HOMOSASSA FL 34446	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Jones, Jerry 5362 W. Rochelle St. Homosassa, FL 34446	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RICH, THURMAN 5550 W STATE STREET HOMOSASSA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Kirk, Diane M. 5452 W. State St. Homosassa, FL 34446	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STAPLES, NANCY 5565 W ROCHELLE ST HOMOSASSA FL 34446	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Staples, Nancy 5565 W. Rochelle St. Homosassa, FL 34446	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EVAN, KRISTINE 5239 W STATE STREET HOMOSASSA FL 34446	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rich, Thurman 5550 W. State St. Homosassa, FL 34446	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HEINLE, DELL 5464 W ROCHELLE ST HOMOSASSA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ashmore, Colby 5540 W. Rochelle St. Homosassam FL 34446	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FENNER, RONALD 5327 W ROCHELLE ST HOMOSASSA FL 34446	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mounts, John 5641 W. State ST. Homosassa, FL 34446	☐ Change ☒ Addition

CR2E037 (9/99)

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 Jerry Jones JERRY JONES PRESIDENT 2/15/00 (352) 621-0541
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #