

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Mar 17 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N48627 (6)**

1. Corporation Name  
**OAK BEND HOMEOWNERS ASSOCIATION, INCORPORATED**



Principal Place of Business A-124 10620 SW 27TH AVE. Ocala FL 34476 US	Mailing Address A124 10620 SW 27TH AVE. Ocala FL 34476 US
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3. Date Incorporated or Qualified <b>04/29/1992</b>	
4. FEI Number <b>59-3117022</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**KREMERS, GERHARD**  
 10620 SW 27TH AVE.  
 M-006  
 Ocala FL 34476

(DELETE)

10. Name and Address of New Registered Agent

81 Name <b>WEISS, GEORGE</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>10620 SW 27th Avenue</b>	
83 City <b>M-007</b>	
84 City <b>Ocala, FL</b>	85 Zip Code <b>34476</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Leonard A. Weiss George A. Weiss 3-12-98

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

12. OFFICERS AND DIRECTORS

TITLE <b>DP</b>	<b>KREMERS, GERHARD</b>	<input checked="" type="checkbox"/> DELETE
NAME	10620 SW 27TH AVE A028	
STREET ADDRESS	Ocala FL	
CITY-ST-ZIP		
TITLE <b>D</b>	<b>ROWLAND, LEONARD</b>	<input type="checkbox"/> DELETE
NAME	10620 SW 27 AVE, K-006	
STREET ADDRESS	Ocala FL	
CITY-ST-ZIP		
TITLE <b>DS</b>	<b>KRONENTHAL, PAULNE</b>	<input checked="" type="checkbox"/> DELETE
NAME	10620 SW 27TH AVE A010	
STREET ADDRESS	Ocala FL	
CITY-ST-ZIP		
TITLE <b>DT</b>	<b>THOMAS, PAULNE</b>	<input checked="" type="checkbox"/> DELETE
NAME	10620 SW 27 AVE, M-009	
STREET ADDRESS	Ocala FL	
CITY-ST-ZIP		
TITLE <b>D</b>	<b>HULBERT, WALTER</b>	<input checked="" type="checkbox"/> DELETE
NAME	10620 SW 27TH AVE A038	
STREET ADDRESS	Ocala FL	
CITY-ST-ZIP		
TITLE <b>VD</b>	<b>WEISS, GEORGE</b>	<input checked="" type="checkbox"/> DELETE
NAME	10620 SW 27 AVE, M-007	
STREET ADDRESS	Ocala FL	
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <b>DP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME <b>WEISS, GEORGE</b>	
1.3 STREET ADDRESS <b>10620 SW 27TH AVE, M-007</b>	
1.4 CITY-ST-ZIP <b>Ocala, FL</b>	
2.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME <b>ROWLAND, LEONARD</b>	
2.3 STREET ADDRESS <b>10620 SW 27TH AVE, K-006</b>	
2.4 CITY-ST-ZIP <b>Ocala, FL</b>	
3.1 TITLE <b>DS</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME <b>ELEANOR LUKAS</b>	
3.3 STREET ADDRESS <b>10620 SW 27TH AVE A-017</b>	
3.4 CITY-ST-ZIP <b>Ocala, FL</b>	
4.1 TITLE <b>DT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME <b>THOMAS, HERBERT</b>	
4.3 STREET ADDRESS <b>10620 SW 27TH AVE, M-009</b>	
4.4 CITY-ST-ZIP <b>Ocala, FL</b>	
5.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME <b>WORRELL, ROBERT</b>	
5.3 STREET ADDRESS <b>10620 SW 27TH AVE, M-005</b>	
5.4 CITY-ST-ZIP <b>Ocala, FL</b>	
6.1 TITLE <b>VD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME <b>FLOYD CHRISTIE</b>	
6.3 STREET ADDRESS <b>10620 SW 27TH AVE, A-026</b>	
6.4 CITY-ST-ZIP <b>Ocala, FL</b>	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Leonard A. Weiss George A. Weiss 3-12-98 352-273-8374

CR2E037 (10/97)