

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90106 008 ****61.25

DOCUMENT # N48627

1. Entity 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

90014393



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
A-076
Suite, Apt. #, etc.
City & State
Country

CHECK HERE IF MAKING CHANGES

City & State
Ocala, Florida

Zip
34476

Country
US

4. FEI Number **59-3117022**

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

DIRKS, RONALD
10620 SW 27TH AVE K-15
OCALA FL 34476

Name
DOROTHY SLATER

Street Address (P.O. Box Number is Not Acceptable)

10620 SW 27th Ave. D-011

City
OCALA

State
FL

Zip Code
34476

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 Dorothy Slater, President *Dorothy Slater* 1-28-03

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

FILE NOW: FEE IS \$61.25

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DIRKS, RONALD 10620 SW 27TH AVE K-15 OCALA FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Slater, Dorothy 10620 SW 27th Ave. D-011 Ocala, FL 34476 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BUDGE, MICHAEL J 10620 SW 27TH AVE K-15 OCALA FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-DV Mittendorf, Barbara 10620 SW 27th Ave A-114 Ocala, FL 34476 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MACNAUGHTON, DIANE 10620 SW 27TH AVE L-1 OCALA FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Meier, Marilyn 10620 SW 27th Ave G-002 Ocala, FL 34476 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SUNDIE, BETTY D 10620 SW 27TH AVE K-3 OCALA FL 34476 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition UNO CHANGE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEVENS, SANDRA 10620 SW 27TH AVE A-25 OCALA FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Powell, Carol 10620 SW 27th Ave A-030 Ocala, FL 34476 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENTRUP, SHIRLEY 10620 SW 27TH AVE A-113 OCALA FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Miller, Albert 10620 SW 27th Ave F-011 Ocala, FL 34476 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: **DOROTHY SLATER, PRESIDENTED** *Dorothy Slater* 1-28-03 352-841-7565

CR2E037 (10/02)

Attachment

90014393

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OAK BEND HOMEOWNERS ASSOCIATION, INCORPORATED

Doc. #

N48627

D

MANNIX, TOMMIE DeLete
10620 SW 27th Ave A-010
Ocala, FL 34476

ADDITONS/CHANGES TO OFFICERS AND DIRECTORS

D NETTNIN, CHARLES X Change
10620 SW 27th Ave A-106
Ocala, FL 34476