2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 25, 2005 8:00 am **Secretary of State DOCUMENT # N93000002174** 01-25-2005 90036 029 ****61.25 OAK FOREST OF TAMPA HOMEOWNERS ASSOCIATION, Principal Place of Business Mailing Address UUUUJIUU P.O. BOX 290993 P.O. BOX 290993 TEMPLE TERRACE, FL 33687-0993 TEMPLE TERRACE, FL .33687-0993 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01182005 Chg-NP CR2E037 (10/03) City & State 4. FEI Number 65-0411157 Applied For City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Longi REED, VAMES 8305 LEVEE LANE Street Address (P.O. Box Number is Not Acceptable SAVANNA TAMPA, FL 33637 AMPA 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 . (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to: Due by May 1, 2005 Trust Fund Contribution. Florida Department of State , Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 TITLE Delete TITLE DIRECTOR **Addition** Jonathan Hengst 7510 SAVannah Lane BERRIOS, ISRAEL NAME STREET ADDRESS 7424 BECKY THATCHER LANE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33637 CITY-ST-ZIP Tampa, FL 33637 STD ☐ Delete President Change **⊠**:Addition STEPHENS, HAZEL S Fredric Long NAME NAME STREET ADDRESS 7511 SAVANNAH LANE STREET ADDRESS 7602 SAvennah Lane Tampa, 1% 33637 CITY-ST-ZIP **TAMPA, FL 33637** CITY-ST-ZIP Reginald Hines 7411 Beeky THATCHER Lane TANDA Delete TTDE ☐ Change **★**Addition MANQUS, ROBERTA 8302 LEVEE LANE STREET ADDRESS STREET ADDRESS TAMPA, FL 33637 CITY-ST-ZIP TAMPA, FL_33637 CITY-ST-7IP TITLE Delete ☐ Change NAME REED, JAMES NAME STREET AODRESS 8305 LEVEE LANE STREET ADDRESS **TAMPA, FL 33637** CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Addition BLAKE, CYNTHIA NAME STREET ADDRESS 7519 SAVANNAH LANE STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33637** CITY-ST-ZIP TITEF ☐ Delete TOTE ☐ Change Addition NAME

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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 fall other like propowered.

STREET ADDRESS

CITY-ST-ZIP **

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP