

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000830

FILED
Feb 17, 2010
Secretary of State

Entity Name: THE OAKBRIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10036 SAWGRASS DRIVE WEST
SUITE 1
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

5455 A1A SOUTH
SUITE 3
SAINT AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-3370513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES INC
5455 A1A SOUTH
SAINT AUGUSTINE, FL 32080 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: PAULI, FRED
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P
Name: GARRETT, WILLIAM S
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S
Name: SHEARER, DUSTY
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D
Name: HICKS, BOBBY
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VP
Name: GERBERT, JEFF
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T
Name: SMITH, STUART
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: STUART SMITH

T

02/17/2010

Electronic Signature of Signing Officer or Director

Date