


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2008 8:00 am**  
**Secretary of State**

03-24-2008 90061 006 \*\*\*\*61.25

DOCUMENT # N96000002098			
1. Entity Name OAK CREST ESTATES ASSOCIATION, INC.			
Principal Place of Business 6938 OAK CREST WAY ZEPHYRHILLS, FL 33542 US		Mailing Address 6938 OAK CREST WAY ZEPHYRHILLS, FL 33542 US	
2. Principal Place of Business - No P.O. Box # 38642 Evelyn Ln. Suite, Apt. #, etc.		3. Mailing Address 38642 Evelyn Ln. Suite, Apt. #, etc.	
City & State Zephyrhills FL		City & State Zephyrhills FL	
Zip FL		Zip 33542	
Country (Passes) USA		Country USA	
4. FEI Number 59-3375527		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent KNOWLTON, KAREN 6938 OAK CREST WAY ZEPHYRHILLS, FL 33542		7. Name and Address of New Registered Agent Name Cricket Wilson Street Address (P.O. Box Number is Not Acceptable) 38642 Evelyn Ln. City Zephyrhills FL Zip Code 33542	
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 <u>Karen Knowlton</u> DATE <u>3/20/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D ROTHGEB, ROBERT W 6920 OAK CREST WAY ZEPHYRHILLS, FL 335421694 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jason Hopp President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6951 Oak Crest Way Zephyrhills, FL 33542
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KNOWLTON, KAREN 6938 OAK CREST WAY ZEPHYRHILLS, FL 33542 <input checked="" type="checkbox"/> Delete <i>replace w/ →</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cricket Wilson ST <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 38642 Evelyn Ln. Zephyrhills, FL 33542
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGEL, JIM 6901 OAK CREST WAY ZEPHYRHILLS, FL 33542 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAUME, STOY 6911 OAK CREST WAY ZEPHYRHILLS, FL 33542 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNOWLTON, DOUGLAS 6938 OAK CREST WAY ZEPHYRHILLS, FL 33542 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEELE, GARY 6937 OAK CREST WAY ZEPHYRHILLS, FL 33542 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Ka Knowlton</u>		Date <u>3/20/08</u> Daytime Phone # <u>352-523-1200</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			