

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90027 004 ****61.25



DOCUMENT # N96000002098

1. Entity Name

OAK CREST ESTATES ASSOCIATION, INC.

Principal Place of Business

6920 OAK CREST WAY
ZEPHYRHILLS FL 33542
US

Mailing Address

6920 OAK CREST WAY
ZEPHYRHILLS FL 33542-1694
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3375527

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required



MOORE CR2E037 (11/03)

6. Name and Address of Current Registered Agent

JOHNSON, LEONARD H
37837 MERIDIAN AVENUE STE 314
DADE CITY FL 33525

7. Name and Address of New Registered Agent

Name CAROL M. ROTHGEB
Street Address (P.O. Box Number is Not Acceptable)
6920 OAK CREST WAY
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: [Signature] CAROL M. ROTHGEB, Sec'y Treas. DATE: 2/4/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE		<input type="checkbox"/> Delete
NAME	ROTHGEB, ROBERT W	
STREET ADDRESS	6920 OAK CREST WAY	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542-1694	
TITLE		<input type="checkbox"/> Delete
NAME	ROTHGEB, CAROL M	
STREET ADDRESS	6920 OAK CREST WAY	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542-1694	
TITLE		<input checked="" type="checkbox"/> Delete
NAME	HILL, JULIE	
STREET ADDRESS	38704 EVELYN LANE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542	
TITLE		<input type="checkbox"/> Delete
NAME	DAUME, STOY	
STREET ADDRESS	6911 OAK CREST WAY	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542	
TITLE		<input type="checkbox"/> Delete
NAME	FLANNERY, JIM	
STREET ADDRESS	38642 EVELYN LANE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542	
TITLE		<input type="checkbox"/> Delete
NAME	HEINZMAN, JERRY	
STREET ADDRESS	38634 EVELYN LANE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D SIM ENGEL	
STREET ADDRESS	6901 OAK CREST WAY	
CITY-ST-ZIP	Zephyrhills, FL 33542	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: [Signature] Sec'y Treas. DATE: 2/4/04 813-779-8441
Signature and typed or printed name of signing officer or director