

2001 UNIFORM BUSINESS REPORT (UBR)

5/2/

FILED
Jun 08, 2001 8:00 am
Secretary of State

05-02-2001 90005 033 ****61.25

DOCUMENT # N96000002681

1. Entity Name

OAKLAND POINTE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

29 OAKLAND POINTE CIRCLE
 PO BOX 1011
 OAKLAND FL 34760
 US

PO BOX 1011
 OAKLAND FL 34760
 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

59-3425397

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

RICHEY, SHIRLEY
PO BOX 1011
29 OAKLAND POINTE CIRCLE
OAKLAND FL 34760

Name **Gene Vernon Hair**
 Street Address (P.O. Box Number is Not Acceptable)
P.O. Box 925
24 OAKLAND Pointe Circle
 City **OAKLAND** FL **34760**

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.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/25/01

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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINK, CHUCK 10821 BAYSHORE DR WINDERMERE FL 34788	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, KRAIG 16 OAKLAND POINTE CIRCLE OAKLAND FL 34760	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RICHEY, SHIRLY D 29 OAKLAND POINTE CIR OAKLAND FL 34760	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTOPHER, KATHY D 30 OAKLAND POINTE CIR OAKLAND FL 34760	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD member Gene Vernon Hair 24 OAKLAND Pointe Circle OAKLAND, FL 34760	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD member Mark Christopher 30 OAKLAND Pointe Circle OAKLAND, FL 34760	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD member Robert Mack 20 OAKLAND Pointe Circle OAKLAND, FL 34760	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD member Mark Miller 14 OAKLAND Pointe Circle OAKLAND, FL 34760	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD member Molly Fabiano 6 OAKLAND Pointe Circle OAKLAND, FL 34760	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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 exemption stated in Section 119.07(3)(l), 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/01 (407)654-8875

Date

Daytime Phone #

CR2E037 (10/00)