

FILE NOW: FILING FEE IS \$61.25

FILED
May 19 1998 8:00am
Secretary of State

**NONPROFIT
CORPORATION
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004770 (1)

1. Corporation Name

OAK HARBOR PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**2121 GRAND HARBOR BOULEVARD
VERO BEACH FL 32967**

**2121 GRAND HARBOR BOULEVARD
VERO BEACH FL 32967**

3. Date Incorporated or Qualified

09/13/1996

4. FEI Number

65-0711847

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HENN, PETER J
2121 GRAND HARBOR BOULEVARD
VERO BEACH FL 32967**

81 Name

Heberling, Lynn M.

82 Street Address (P.O. Box Number is Not Acceptable)

4820 20th Avenue

83

84 City

Vero Beach,

FL

85 Zip Code
32967

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Lynn M. Heberling, **LYNN M. HEBERLING**

4/27/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PTD** ☐ DELETE
NAME **WIDELL, DOUGLAS**
STREET ADDRESS **2121 GRAND HARBOR BOULEVARD**
CITY-ST-ZIP **VERO BEACH FL 32967**

1.1 TITLE **DP** ☒ Change ☐ Addition
1.2 NAME **Widell, Douglas**
1.3 STREET ADDRESS **2121 Grand Harbor Blvd.**
1.4 CITY-ST-ZIP **Vero Beach, FL 32967**

TITLE **D** ☐ DELETE
NAME **BYRNE, SUE C**
STREET ADDRESS **2121 GRAND HARBOR BOULEVARD**
CITY-ST-ZIP **VERO BEACH FL**

2.1 TITLE **DST** ☒ Change ☐ Addition
2.2 NAME **Byrne, Sue C.**
2.3 STREET ADDRESS **2121 Grand Harbor Blvd.**
2.4 CITY-ST-ZIP **Vero Beach, FL 32967**

TITLE **VD** ☐ DELETE
NAME **FLICKINGER, MARIA**
STREET ADDRESS **2121 GRAND HARBOR BOULEVARD**
CITY-ST-ZIP **VERO BEACH FL 32967**

3.1 TITLE **DVP** ☒ Change ☐ Addition
3.2 NAME **Flickenger, Maria**
3.3 STREET ADDRESS **2121 Grand Harbor Blvd.**
3.4 CITY-ST-ZIP **Vero Beach, FL 32967**

TITLE **S** ☒ DELETE
NAME **HENN, PETER J**
STREET ADDRESS **2121 GRAND HARBOR BOULEVARD**
CITY-ST-ZIP **VERO BEACH FL 32967**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **M** ☐ DELETE
NAME **HEBERLING, LYNN**
STREET ADDRESS **4820 20TH AVE**
CITY-ST-ZIP **VERO BEACH FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Lynn M. Heberling

4/27/98 (561) 778-5945

CP2E037 (10/97)