

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007061

FILED
Apr 22, 2005
Secretary of State

Entity Name: OAK HAMMOCK AT THE UNIVERSITY OF FLORIDA, INC.

Current Principal Place of Business:

5100 SW 25TH BLVD
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5100 SW 25TH BLVD
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3562098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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: PD () Delete
Name: REMBERT, DAVIS M JR.
Address: NW CR 239
City-St-Zip: ALACHUA, FL 32615

Title: VPD () Delete
Name: BRAM, LESLIE D
Address: 2012 W. UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32603

Title: STD () Delete
Name: FRANK, ROBERT G DEAN
Address: ROOM 4101 HPNP BLDG BOX 100185
City-St-Zip: GAINESVILLE, FL 32610

Title: D () Delete
Name: ASH, CAROL R
Address: 101 S NEWELL DR ROOM 3220
City-St-Zip: GAINESVILLE, FL 32611

Title: D () Delete
Name: BRYAN, ROBERT A
Address: 1938 W UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32603

Title: D () Delete
Name: CRISER, PAULA
Address: 10000 SW 52ND AVE #B7
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: BRAM, LESLIE D
Address: 1938 W UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32603

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCHAFFER, GERALD
Address: 8801 SW 45TH BLVD
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Change () Addition
Name: LEVITT, ROBERT A
Address: 10318 SW 22ND AVENUE
City-St-Zip: GAINESVILLE, FL 32607

Title: D (X) Change () Addition
Name: DE LANEY, PAULA
Address: 75 SW 23RD WAY
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: R. DAVID STAUFFER

Electronic Signature of Signing Officer or Director

CEO

04/22/2005

Date