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Mar 25 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N94000005906 (2)  
1. Corporation Name  
OAK HOLLOW HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address  
639 LADY LYNN COURT OVIDEDO FL 32765 US  
P.O. BOX 620821 OVIDEDO FL 32762-0821 US

2. Principal Place of Business 21 664 Kelly Green	2e. Mailing Address 26 P.O. BOX 620821 OVIDEDO FL 32762-0821 US	3. Date Incorporated or Qualified 12/01/1994	3a. Date of Last Report 02/15/1996
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-3282355	Applied For Not Applicable
23 City & State Oviedo FL	28 City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
24 Zip 32765	29 Country US	25 Country	30 Zip
6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent  
RUSSELL, ANNE H  
185 W SR 434  
WINTER SPRINGS FL 32807

10. Name and Address of New Registered Agent  
81 Name Joseph A. BAGOSY  
82 Street Address (P.O. Box Number is Not Acceptable) 664 Kelly Green  
83  
84 City Oviedo FL 85 Zip Code 32765

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: *Joseph A. Bagosy* DATE: 1-24-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP BAGOSY, JOSEPH	1.1 TITLE	
NAME	664 KELLY GREEN STREET	1.2 NAME	
STREET ADDRESS	OVIDEDO FL	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	DV HALL, GARY	2.1 TITLE	
NAME	647 LADY LYNN COURT	2.2 NAME	
STREET ADDRESS	OVIDEDO FL	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	DS POTTER, MIKE	3.1 TITLE	
NAME	692 KELLY GREEN STREET	3.2 NAME	
STREET ADDRESS	OVIDEDO FL	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	DT SIMS, MARK	4.1 TITLE	DAVID, DAVID D
NAME	639 LADY LYNN COURT	4.2 NAME	678 Kelly Green St
STREET ADDRESS	OVIDEDO FL	4.3 STREET ADDRESS	Oviedo, FL 32765
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	D CASE, RUSS	5.1 TITLE	WATERS CURTIS DT
NAME	608 KELLY GREEN STREET	5.2 NAME	573 Kelly Green
STREET ADDRESS	OVIDEDO FL	5.3 STREET ADDRESS	OVIDEDO FL
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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: *Joseph A. Bagosy* DATE: 2/28/97 407 825-4998  
0014364

CR2E037 (9/96)