

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION
1940 North Monroe Street
Tallahassee, FL 32399-0783**

**Note: This form must be submitted with
DBPR 0070 Uniform Complaint Form**

If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

STATUTORY DEFINITION OF COMMUNITY ASSOCIATIONS

Name of Association

OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.

Address of Association

1111 FORREST NELSON BLVD, PORT CHARLOTTE, FL 33952

1. Is this a residential homeowner's association in which membership in the association is a condition of ownership of the unit?

Yes No

2. Is the association authorized to impose a fee which may become a lien against a unit if not paid?

Yes No

What is the total number of units within the association?

452

PERFORMING AS A COMMUNITY ASSOCIATION MANAGER (CAM)

Name of the Subject

JULIE MARR

Is the Subject employed by one or more associations or by a company that provides services to one or more associations?

Yes No

If yes, how many associations are involved?

1

Name of association(s) and/or company

OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.

Total number of units in all associations

N/A

Does the Subject receive compensation (for instance, a salary, reduction in rent or fees, free rent, or any other benefits) for his or her services?

Yes No

What is the total dollar amount of the association's annual budget(s)?

\$264,000

SPECIFIC DUTIES

Does the Subject have the authority to control or disburse association funds, for instance:

- a. Does the Subject receive funds from unit owners either by check or cash? Yes No
- b. What does the Subject do with the funds: write receipts, make bank deposits?
- c. Does the Subject post funds to the accounts? Yes No
- d. Does the Subject have the authority to sign checks and does the Subject sign the checks? Yes No
- e. Does the association maintain a petty cash fund and is the Subject authorized to spend petty cash? Yes No
- f. Does the Subject have the authority to make changes in the association accounts? Yes No
- g. Does the Subject work directly for a licensed CAM or is he/she a licensed CAM? Yes No
If yes, what is the name and license number of the CAM?
N/A

Can the Subject incur charges on association accounts? Yes No

Who approves invoices for payment (work completed, supplies delivered)? (Name and Address)
JULIE MARR, 1379 Salyers St, Port Charlotte, FL 33952

Does the Subject have input regarding the monthly or yearly financial statements? Yes No
If yes, explain: SHE IS A MEMBER OF THE BUDGET COMMITTEE AND SUBMITS BUDGETS TO THE COMMITTEE FOR REVIEW

Does the Subject have input in preparing the annual budget? Yes No
If yes, explain: SHE SUBMITS BUDGETS FOR REVIEW

- Does the Subject determine when or how to provide notice of association meetings? Yes No
- Does the Subject conduct the association meetings? Yes No
- Does the Subject coordinate the overall operation of the association? Yes No
- Does the Subject supervise other association employees? Yes No

Who do unit owners notify with maintenance problems? JULIE MARR, CAM

Is the Subject a registered agent for the association? Yes No

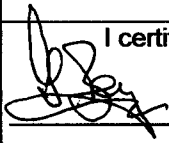
Does the Subject perform clerical functions under the direct supervision and control of a licensed CAM? Yes No

If yes, what is the name and license number of the CAM?
N/A

Does the Subject perform only maintenance services? Yes No

ADDITIONAL INFORMATION (attach additional pages if needed):

I certify the above is true and correct to the best of my knowledge and belief.



June 15, 2009

(Signature)

(Date)

Jan W. Bergemann

(Print Full Name)