


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2008 8:00 am**  
**Secretary of State**

04-16-2008 90037 025 \*\*\*\*61.25

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<b>DOCUMENT # 729565</b>			
1. Entity Name OAK PARK TERRACE, INC.			
Principal Place of Business 400 18TH STREET VERO BEACH, FL 32960		Mailing Address 400 18TH STREET VERO BEACH, FL 32960	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02082008		Chg-NP CR2E037 (12/06)	
4. FEI Number 59-1652725		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CADY, JOHN 400 18TH ST. O-5 VERO BEACH, FL 32960		Name John Cady Street Address (P.O. Box Number is Not Acceptable) 400 18th St, O-5 City Vero Beach FL Zip Code 32960	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>John Cady President</i>		DATE 4-14-08	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALNOSKI, SUSAN 400 18TH STREET N-4 VERO BEACH, FL 32960 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Susan Malinowski <input type="checkbox"/> Change <input type="checkbox"/> Addition 400 18th St. N-4 Vero Beach, Fl. 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CADY, JOHN 400-18TH ST., APT O-5 VERO BEACH, FL 32960 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	John Cady <input type="checkbox"/> Change <input type="checkbox"/> Addition 400 18th St. O-5 Vero Beach, Fl; 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMSON, JEAN 400 18TH ST., P: - VERO BCH, FL 32960 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Steve Peirce <input type="checkbox"/> Change <input type="checkbox"/> Addition 400 18th St. O-2 Vero Beach, Fl. 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RATTI, JAMIE 400 18 ST M-4 VERO BCH, FL 32960 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gisela Peirce <input type="checkbox"/> Change <input type="checkbox"/> Addition 400 18th St. O-2 Vero Beach, Fl. 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MAIER, PAUL J 400-18TH ST., APT H-2 VERO BEACH, FL 32960 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Paul J. Maier <input type="checkbox"/> Change <input type="checkbox"/> Addition 400 18th St. H-2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HALL, BARBARA 400 18TH STREET F-5 VERO BEACH, FL 32960 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bill Robertson <input type="checkbox"/> Change <input type="checkbox"/> Addition 400 18th Stt. I-8 Vero Beach, Fl. 32960
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>John Cady - JOHN CADY President</i>		Date 4-14-08 Daytime Phone # 569 6655	