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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G92477**

1. Corporation Name
OAK WOOD ASSOCIATES, INC.

Principal Place of Business	Mailing Address
4028 ROLLING OAKS DRIVE WINTER HAVEN FL 33880	4028 ROLLING OAKS DRIVE WINTER HAVEN FL 33880

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 03/21/1984

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

4. FEI Number: 59-2423750 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SHARIT JR, JOE L
99 SIXTH ST SW
WINTER HAVEN 33880

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BROWN ELIZABETH D 4080 ROLLING OAKS DR WINTER HA	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D ZULLI, RUTH 4131 SPRUCEWOOD ST. WINTER HAVEN, FL.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WILFRED ZOLLINGER 4178 ROLLING OAKS DRIVE WINTER HAVEN FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D ROWE, ROBERT B. JR. 4067 ROLLING OAKS DRIVE WINTER HAVEN, FL.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FRANK E. COCHRAN 4415 LIMEWOOD ST. WINTER HAVEN FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS FORCE DORIS 4319 CHERRYWOOD ST WINTER HAVEN FL 33880	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT LAFOYE, SCHULDT 4097 ROLLING OAKS WINTER HAVEN FL 33880	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NAYLOR, RICHARD 4206 CEDARWOOD ST WINTER HAVE FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/98)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Elizabeth D. Brown Elizabeth D. Brown March 9, 1999 (941) 299-5696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

President