2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G92477

FILED Mar 10, 2005 Secretary of State

Entity Name: OAK WOOD ASSOCIATES, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
	ING OAKS DRI AVEN, FL 338				
Current Mailing Address:			New Mailing Address:		
4028 ROLLING OAKS DRIVE WINTER HAVEN, FL 33880					
FEI Number:	59-2423750	FEI Number Applied For () FEI Nur	mber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
STAMBAUGH, ROBERT J 99 SIXTH ST SW WINTER HAVEN, FL 33880 US					
The above in the State		bmits this statement for the purpose of	of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
Election Cam	paign Financing	Frust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () E MONDELLO, ROI 4235 CEDARWO WINTER HAVEN,	OD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MONDELLO, ROBERT 4235 CEDARWOOD STREET WINTER HAVEN, FL 33880	
Title: Name: Address: City-St-Zip:	D () E ROBINSON, KEN 4240 ROLLING O WINTER HAVEN,	AKS	Title: Name: Address: City-St-Zip:	DV (X) Change () Addition ROBINSON, KENDALL J 4240 ROLLING OAKS DRIVE WINTER HAVEN, FL 33880	
Title: Name: Address: City-St-Zip:	PD () E BROWN, ELIZAB 4080 ROLLING O WINTER HAVEN,	AKS	Title: Name: Address: City-St-Zip:	DT (X) Change () Addition BURKE, VIRGINIA 4046 ROLLING OAKS DRIVE WINTER HAVEN, FL 33880	
Title: Name: Address: City-St-Zip:	DS () E FORCE, DORIS 4319 CHERRYW WINTER HAVEN,		Title: Name: Address: City-St-Zip:	DS (X) Change () Addition IRELAND, ANTHONETTA 4077 ROLLING OAKS DRIVE WINTER HAVEN, FL 33880	
Title: Name: Address: City-St-Zip:	DV () E SCHULDT, LA FO 4097 ROLLING O WINTER HAVEN,	AKS	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition SCHULDT, LA FOYE 4097 ROLLING OAKS WINTER HAVEN, FL 33880	
Title: Name: Address: City-St-Zip:	D () E NAYLOR, RICHAI 4206 CEDARWO WINTER HAVEN,	OD ST	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAFOYE SCHULDT DP 03/10/2005