2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000086010

Entity Name: OAK RIDGE, INC.

FILED Feb 10, 2012 Secretary of State

Current Mailing Address: New Mailing Address: 1001 GRACE AVE HAINES CITY, FL 33844 FEI Number: 59-3538127 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLT, DAVE LANE 880 LISA LANE HAINES CITY, FL 33844 US 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. SIGNATURE:	Current Principal Place of Business:		New Principal Place of Business:		
1001 GRACE AVE HAINES CITY, FL 33844 FEI Number: 59-3538127 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: HOLT, DAVE LANE 880 LISA LANE HAINES CITY, FL 33844 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or boin the State of Florida. SIGNATURE:	1001 GRACE AVE HAINES CITY, FL 33844				
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880 LÍSA LANE HAINES CITY, FL 33844 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bo in the State of Florida. SIGNATURE:	Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
in the State of Florida. SIGNATURE:	880 LÍSA LANE	US			
		bmits this statement for the p	ourpose of changing its registered	office or registered agent, or both	
	SIGNATURE:				
Electronic Signature of Registered Agent Date	Electronic Signature of Registered Agent		ent	Date	

OFFICERS AND DIRECTORS:

Title:

HOLT, DAVE LANE Name: Address: 880 LISA LN

City-St-Zip: HAINES CITY, FL 33844

VPT Title:

Name: PANTANO, NADINE A

Address: 880 LISA LN

HAINES CITY, FL 33844 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: NADINE PANTANO MS 02/10/2012