FILE NOW: FILING FEE AFTER MAY 1 IS \$550.

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT

Sandra B. Morth

Socretary of State DIVISION OF CORPORA IONS

DOCUMENT # 362587

(8)

OAK PARK VILLAGE INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1997 8:00am Secretary of State



2426 N E 14TH STREET OCALA FL 34470		2426 N E 141H STHEET OCALA FL 34470-4792				
US		U\$	•		3. Date Incorporated or Qualified	3a. Date of Last Report
					04/14/1970	04/04/1996
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26	26		59-1352833	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			G. Commonic of clares adding	Fee Required
City & State		City & State	 		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	2 _{(p}	Count	У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
24	25 9. Name and Address of C	29	30	Florida Statutes Yes No 10. Name and Address of New Registered Agent		· · · · · · · · · · · · · · · · · · ·
LANZA		anon riogistorea Agent	8	Name	10. Maine and Products of How the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	TT,G Q		<u> </u>			
	: N.E. 14TH ST. La FL 32670		82	Street Add	ress (P.O. Box Number is Not Acceptable	e)
OCA	LA FL 3201V		8:	3		
			<u>_</u> _	<u> </u>		
			8	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Florida Stat	utes, the abo	ve-named cor	poration submits this statement for the pi	urpose of changing its registered
office or r	egistered agent, or both, in the m familiar with, and accept the	State of Florida. Such change was obligations of, Section 607,0506, I	s authorized b Etorida Statute	by the corpora	tion's board of directors. I hereby accep	t the appointment as registered
SIGNATURE	III Identida III II Sala adaayi ii aa					
SIGNATURE	Signature, typed or ponted name of registr	ered agent and site if applicable (Ne	OTE Registered A	gent signature requ	ired when reinstaling)	DATE
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	VSD	DELETE	1.1]11[[[Change Addition
NAME	WYATT, ROSETTA		1,2 NAME			
STREET ADDRESS	2426 NE 14TH ST		1.3 STREE	1 ADDRESS		
CITY-ST-ZIP	OCALA, FL 00000	Division	1.4 CITY-	S1-ZIP		
TITLE	PTD	DELETE	2.1 TALE			Change L Addition
NAME	WYATT, G. Q		2.2 NAME			
STREET ADDRESS	2426 NE 14TH ST		2.3 STREET			
CITY-ST-ZIP TITLE			2. 4 City 3 1 Title	-SI-ZIP		Change Addition
NAME			3.2 NAME			
STREET ADDRESS				ET ADDRESS		·
CITY-ST-ZIP			3.4. CITY	1		
TITLE		☐ DELF1E	4.1 TITLE			Change Addition
NAME			4. 2 NAM			, -
STREET ADDRESS			4.3 STREE	FL ADDRESS		
CITY-ST-ZIP			4.4 CITY	1		
TITLE		DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAME	:]		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			54011	\$1 - ZIP		
TITLE		☐ DECETE	6 1 Tille			Change Addition
NAME			6.2 NAME	·		
STREET ADDRESS			6.3 STRE	T ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	6.4 C(1Y-			
14. do herel	by certify that the information su	applied with this filing does not qui	ality for the ex	emption state	d 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 of 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 or Block 14 or Block 14 or Block 15 or Block 15 or Block 16 or Block 16 or Block 16 or Block 16 or Block 17 or Block 17 or Block 17 or Block 18 or Block 18 or Block 18 or Block 19 or Blo