2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State
04-18-2003 90146 039 ***150.00

DOCUMENT # 585980

1. Entity Name
HOBBY OASIS, INC.

Principal Place of Business	Mailing Address
540 ATLANTIC BLVD NEPTUNE BEACH FL 32266-4024	540 ATLANTIC BLVD NEPTUNE BEACH FL 32266-4024

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
3520-3 ST. Johns Bluff	3520-3 ST. Johns Bluff RD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville	City & State: JACKSONVILLE FL
Zip: 32224 Country: USA	Zip: 32224 Country: USA

4. FEI Number 59-1840405 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VOYLES, SUE 13034 LOBLOLLY LN S JACKSONVILLE FL 32246	Name: DAVID HENK Street Address (P.O. Box Number is Not Acceptable): 4006 LANDFALL LANE City: JACKSONVILLE FL Zip Code: 32224

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: David C. Henk — David C. Henk — 4/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD VOYLES, KATHLENE H. 540 ATLANTIC BLVD NEPTUNE BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HENK, DAVID C. 4006 LANDFALL LN. JACKSONVILLE FL 32250	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD NORVELLE, MARTHA L 540 ATLANTIC BLVD NEPTUNE BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MARY ALICE HENK 225 ELMORE AVE MERCERVILLE NJ 08619	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VOYLES, SUE 540 ATLANTIC BLVD NEPTUNE BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD SUZANNE HOARD 4400 MOREHOUSE TERRACE CHESTERFIELD VA 23832	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 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 607, 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: David C. Henk — David C. Henk — 4/15/03 — 904 641 8800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #