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FILED

Apr 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 650409 (6)

1. Corporation Name  
OAK HILL LAND, INC.

Principal Place of Business

1991  
540 AMBASSADOR CT  
SUNNY HILLS FL 32428

Mailing Address

1991  
540 AMBASSADOR CT  
SUNNY HILLS FL 32428



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

01/07/1980

3a. Date of Last Report

07/15/1996

4. FEI Number

59-2026350

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BELECKAS, WITHOLD

1991  
540 AMBASSADOR COURT  
SUNNY HILLS FL 32428

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME BELECKAS, WITHOLD  
STREET ADDRESS 540 AMBASSADOR COURT 1991  
CITY- ST- ZIP SUNNY HILLS FL 32428

TITLE D  
NAME REGISTER, STEPHAN  
STREET ADDRESS 207 STATE ROAD 280 WEST  
CITY- ST- ZIP CHIPLEY FL

TITLE ST  
NAME AGIATO, FRANK  
STREET ADDRESS 520 LINWOOD DRIVE  
CITY- ST- ZIP SUNNY HILLS FL 32428

TITLE DV  
NAME LAPINSKI, ROMAN  
STREET ADDRESS 1040 W FINGERBEARD RD NO 2ND FLR  
CITY- ST- ZIP STATES ISL NY

TITLE V  
NAME LABUTIS, VITAS  
STREET ADDRESS 525 AMBASSADOR COURT  
CITY- ST- ZIP SUNNY HILLS FL 32428

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

14. I do 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.

SIGNATURE:

*Withold Beleckas*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/97

904-773-3333

Date

Daytime Phone #

0514326

CP2E034 (9/96)