## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT #654490** 

1. Entity Name OAK FOREST, INC.

FILED Apr 23, 2007 08:00 AM Secretary of State

Principal Place of Business

255 COREY AVENUE P.O. BOX 67128 ST. PETE BCH., FL 33736 Mailing Address

255 COREY AVENUE P.O. BOX 67128 ST. PETE BCH., FL 33736



DO	NOT	<b>WRITE</b>	IN	<b>THIS</b>	<b>SPAC</b>	E
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01032007	No Chg-P	CR2E034 (11/05)		
4. FEI Numbe			Applied For	
59-1992470			Not Applicable	

5. Certificate of Status Desired

\$8.75 Additional Fee Required

April 2, 2007.

Name and Address of Current Registered Agent
 SEPH W

KLINGEL, JOSEPH W 255 COREY AVENUE SAINT PETE BEACH, FL 33706

**SIGNATURE:** 

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed iname of registered agent and title if applicable. (NOTE: Registered Agent algristure required when rentating)  DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	sing \$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST ST. CLAIR, JOYCE A 255 COREY AVENUE SAINT PETE BEACH, FL 33706						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLINGEL, JOSEPH W 255 COREY AVE SAINT PETE BEACH, FL 33706			U00000727017 05/04/07-80030-025 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 filter tike empowered.							

IGNING OFFICER OR DIRECTOR

Joseph W. Klingel