# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 22, 2009**
**Secretary of State**

DOCUMENT# 710008

**Entity Name:** THE CALVIN AND FLAVIA OAK FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

475 BILTMORE WAY
SUITE 303
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

475 BILTMORE WAY
SUITE 303
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number: 59-6192591** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PECK, JAMES H., II
475 BILTMORE WAY
SUITE 303
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | PD | ( ) Delete |
| Name: | DUNLAP, TULLY F, | |
| Address: | FT. DENAUD RD | |
| City-St-Zip: | LABELLE, FL | |
| Title: | SD | ( ) Delete |
| Name: | PECK, JAMES H., II, | |
| Address: | 637 SAN LORENZO AVENUE | |
| City-St-Zip: | CORAL GABLES, FL | |
| Title: | DAS | ( ) Delete |
| Name: | ROMFH,EMILY N (ASST), | |
| Address: | 3149 BRICKELL AVE | |
| City-St-Zip: | MIAMI, FL | |
| Title: | TD | ( ) Delete |
| Name: | RICKERT, CRAIG L. | |
| Address: | 1111 LINCOLN RD., SUITE 870 | |
| City-St-Zip: | MIAMI BCH., FL | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | TD | (X) Change ( ) Addition |
| Name: | RICKERT, CRAIG L. | |
| Address: | 5580 LAGORCE DR | |
| City-St-Zip: | MIAMI BCH., FL 33140 | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG RICKERT TD 01/22/2009

Electronic Signature of Signing Officer or Director — Date