


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 08:00 AM
Secretary of State

DOCUMENT # F99000005959	
1. Entity Name ROYAL OAK ENTERPRISES, INC.	

Principal Place of Business 1 ROYAL OAK AVENUE ROSWELL, GA 30076	Mailing Address 1 ROYAL OAK AVENUE ROSWELL, GA 30076
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DO NOT WRITE IN THIS SPACE



04022005 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2498652	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COBD KEETER, JAMES P 1 ROYAL OAK AVENUE ROSWELL, GA 30076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLEN, JAMES E 1 ROYAL OAK AVENUE ROSWELL, GA 30076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO LOCKETT, ROBERT 1 ROYAL OAK AVENUE ROSWELL, GA 30076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT CAREY, ROBERT G 1 ROYAL OAK AVENUE ROSWELL, GA 30076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOSSETT, ROBERT G 1 ROYAL OAK AVENUE ROSWELL, GA 30076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000293376
04/08/05-80627-001 150.00

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IN THIS SPACE**

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: Robert G. Carey ROBERT G. CAREY 4/5/05 (678) 461-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #