FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # H78107 (0)OSLO RIDGE, INC. Principal Place of Business Mailing Address 1212 CHEROKEE CT 1212 CHEROKEE CT KISSIMMEE FL 34744-2905 KISSIMMEE FL 34744

FILED Jan 30 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

00						3. Date Incorporated or Qualified		
						09/27/1985		
<u></u>	lace of Business	2a. Mailing Address				4. FEI Number Applied F		
21	N	26				59-2585252 Not Appli		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Addition Fee Required	al	
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	9	
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible		
			30	30		Personal Property Tax due June 30. Yes No		
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
CHARLOTTE S LAWHON				81 Name				
12	12 CHEROKEE COURT		82 Street Add		Street Addr	ress (P.O. Box Number is Not Acceptable)		
KIS	SIMMEE FL 34744					· · · · · · · · · · · · · · · · · · ·		
				33				
			8	34	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 cl							ered	
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	Signature, typed or printed name of registered ager	nt and title if applicable. (NO	TE: Registered A	Agent	it signature requir	red when reinstating) DATE		
12. OFFICERS AND DIRECTORS			13.	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	STD	DELETE	1.1 TITLE	E		Change Ad	dition	
NAME	ME FORD, PATRICIA ANNE			1.2 NAME				
STREET ADDRESS		1.3 STAE	EET A	NODRESS				
CITY-ST-ZIP	KISSIMMEE FL 34744			1.4 CITY-ST-ZIP				
TITLE	PD DELETE		2.1 TITLS	2.1 TITLE		Change Ad	dition	
NAME	LAWHON, CHARLOTTE			2.2 NAME				
STREET ADDRESS	1010 CHEDOVEE COURT			2.3 SYREET ADDRESS				
CITY-ST-ZIP				2, 4 CITY-ST-ZIP				
TITLE				3.1 TITLE		Change Ad	dition	
NAME	EDENFIELD, ROBERT A			3.2 NAME				
STREET ADDRESS				3.3 STREET ADDRESS				
CITY-ST-ZIP LACOMBE LA 70445			3.4. CITY-ST-ZIP					
TITLE	D		4.1 TITLE			☐ Change ☐ Ad	dition	
NAME	EDENFIELD, CHARLES L		4. 2 NAM	Æ				
STREET ADDRESS	14146 STOKESMOUNT		4.3 STRE		inubess			
	HOUSTON TX 77077			4.4 CITY-ST-ZIP		· ·		
CiTY-ST-ZIP TITLE	DELETE			5.1 TITLE		Change Ad	dition	
NAME			5.2 NAM					
i i			5.3 STRE		nnaree			
STREET ADDRESS								
CITY-ST-ZIP TITLE				- \$7-	ZIP Change		dition	
ł ···		T OFFEIG	6.1 TITLE		•	E Grange E Au		
NAME			6.2 NAM	-			ļ	
STREET ADDRESS			6.3 STRE					
CITY-ST-ZIP 6.44 14. I hereby certify that the information supplied with this filing does not qualify for the experience.				-\$1-	-ZIP	Section 110 07/216) Elevido Statutos I further certify that the informs	tion	
14. I nereby o	errily that the information supplied wi	in this hing does not quality i	curate and t	uDill that	Jit stateu In I my sianatu	section 119.07(3)(1), Florida Statutes, I lightler certify that the informative chall have the same legal effect as if made under path; that I am a	in l	

execute this report as required by Chapter 607, Florida Statutes; and that my name appears in