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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	NUAL REPORT 1998				Secretary of State DIVISION OF CORPORATIONS				Secretary of State				
DOCU 1. Corporation	MENT on Name	#	J4610	1	(8)								
OAK H	IILL DEVE	LOPM	ent corpo	PATIO		51 5.4m 4.4m	5 (8)) 5 (8)						
	_												
Principal Place of Business					Mailing Address				i indering arer filien der zelle Affrit in	ni mimit minti	Dinti Blait Bin	II DIŞIL IBBI	
5050 INDUSTRIAL RD. WALL TOWNSHIP NJ 07719				P.O. BOX 465 FARMINGDALE NJ 07727					DO NOT WRITE	AN THUC C	ים אסר		
US				US	US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
9 Dringing F	lace of Busin			T 00 1	dellos Address				12/09/1986 4. FEI Number				
2. Principal F	TRICE OF BUSIN	ess		26	Mailing Address				59-2745861			oplied For ot Applicable	
Suite, Apt.	#, etc.	•		├ ─┐	Suite, Apt. #, etc.	,			5. Certificate of Status Desired		\$8.75	Additional	
City & Stat	e			27	City & State	·			6. Election Campaign Financing		Fee Re \$5.00	<u> </u>	
	11, NJ			28					Trust Fund Contribution			to Fees	
Zip 24	ļ.	Co. 25	intry	29	?ip	30 Co.	intry		This corporation owes or has pa Personal Property Tax due June	-	- ' -	angible No	
[4]			dress of Currer		red Agent	[30]			10. Name and Address of New Re				
	ANLON, TH						B1 Name	aho	A. Shughart, Jr	- E	~ a		
CITRUS CENTER							B2 Stree	Addre	ss (P '. Box Number is Not Acceptable)		- N -		
255 SOUTH ORANGE AVE #1600 ORLANDO FL 32801							83		<i>)</i>		2 2 3 4	<u></u>	
							60 84 City	4 (courtland st,	<u> </u>	85 Zip	Code	
11 Pursuant	to the provision	one of S	ections 607 050	12 and 607	1508 Florida Statu	tne the a	' (Jaconso	CUNING	FL urnose of	32	.४०५ ।	
office or r	egistered age m familiarwit	ent, or t	oth, in the State	of Florida ations of	. Such change was Section 607.0505. F	authorize Iorida Sta	d by the co	rporatio	ration submits this statement for the pon's board of directors. I hereby accer	or the appo	ointment as	registered	
SIGNATURE	do	Ma_	all and	<i>[</i> [120/9	18		
12.	Signature, tylied o	or printed i	OFFICERS AN			It. Registere	Agent signatu	re required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIRECTOR	IS IN 12	
TITLE	PD				DELETE	1.1 Ti	TLE] P/	T/D		Change	Addition	
NAME			OHN P.,JR.			1.2 N	ME						
STREET ADDRESS	5050 IN(ial RD. , nj 07727				REET ADDRESS	En	wall, NJ 07719				
CITY-ST-ZIP TITLE	FARMIN	OUNLE	, NJ U//2/		DELETE	2.1 TI	TY-ST-ZIP Le	V/			Change	X Addition	
NAME						2.2 N		HÀ	RKRADER, LINDA A.				
STREET ADDRESS						2.3 S	RFET ADDRESS	P.	0. Box 14, 407 P	ymou	th Ro	ad	
CITY-ST-ZIP					DELETE		1TY - ST - ZIP		ynned Valley, PA		37	Addition	
NAME .					[_] Ottell	3.1 TI 3.2 N		WE	D STRUM, DEBORAH H.		Change	ČŽÍ VOOIDOII	
STREET ADDRESS							REET ADDRESS	TOU.	20 Joshua Koad			ĺ	
CITY-ST-ZIP						3.4. C	ITY-ST-ZIP	Ft	. Washington, PA	190	_		
TITLE					DELETE	4.1 11				l	Change	☐ Addition	
NAME Street address						4.2 N 4.3 S1	ame Reet address						
CITY-ST-ZIP	i					1	TY-ST-ZIP						
TITLE					☐ DELETE	51 T)	LE				Change	Addition	
NAME						5.2 N							
STREET ADDRESS CITY-ST-ZIP							REET ADDRESS IY+S1-ZIP	1					
TITLE			<u> </u>		☐ DELETE	6.1 Tr		† ···			Change	Addition	
NAME				-		6.2 N/	IME					1	
STREET ADDRESS						6.3 \$1	rfet address						
CITY-ST-ZIP						64 C	TY-ST-71P	1					

14. 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 annual report or supplieriental 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.

1/7/98 732-938-7277

FILED

Feb 03 1998 8:00am