

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # J46101**

1. Entity Name

OAK HILL DEVELOPMENT CORPORATION**FILED****Jan 18, 2000 8:00 am**
Secretary of State

01-18-2000 90040 025 ***150.00

Principal Place of Business

Mailing Address

5050 INDUSTRIAL RD.
WALLTOWNSHIP NJ 07719
USP.O. BOX 465
FARMINGDALE NJ 07727-0465
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2745861**

Applied For

Not Applied For

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHUGHART, JOHN A JR.
255 SOUTH ORANGE AVE
SUITE 801
ORLANDO FL 32801

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	PTD			
	HARKRADER, JOHN P., JR.	5050 INDUSTRIAL RD.	WALLTOWNSHIP NJ 07719	
	VD			
	HARKRADER, LINDA A	P O BOX 14 407 PLYMOUTH RD	GWYNNED VALLEY PA 19437	
	SD			
	WESTRUM, DEBORAH H	6025 JOSHUA RD	FT WASHINGTON PA 19034	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Delete

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

732-938
SIGNATURE REQUIRED John P. Harkrader Jr 1/5/00 7277
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #