		E AFTER MAY 1	IS \$225.00	·	
PROFIT CORPORATION ANNUAL REPORT 1996		Sandra Secre	ARIMENT OF STATE B. Mortham lary of State CORPORATIONS		
	MENT # K91 9	960 (0)			
1. Corporation F.S. Y	^{Name} OAKUM ASSOCIATES, I	` '			
2.0. 1	0711(013) 7100001/11 <u>20</u> (1				
Principal Place	of Business	Mailing Address			il Boil Bibil Bibil Bibil Bibil Bibil Bibil
3616 GREGO LADY LAKE		3616 GREGORY RD. LADY LAKE FL 32159	l		
US		U\$		3. Date incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ice of Business	2a. Mailing Address	•	05/25/1989 4. FETNumber	06/23/1995 Applied For
21]		[26]		59-2953921	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for Florida Statutes XY Yes	intangible tax under si 199.032, □ No
, ,.	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New F	legistered Agent
11. Pursuant to	AKE FL 32159 the provisions of Sections 607.0	1502 and 607 1508 Florida Stabili	83 84 City	ration submits this statement for the pu	FL 85 Zip Code
or registere familiar with	ed agent, or both, in the State of I	Florida. Such change was authoriz Section 607.0505, Florida Statutes	ed by the corporation's bo:	arci of directors. Thereby accept the app	ointment as registered agent. I am
SIGNATURE _	Signature, typical or printed name of registered	agent and tole if applicable. (NC	ITE: Bugistered Agent signature require	ast When the addring:	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	· · · · · · · · · · · · · · · · · · ·
Talle NAME	d Yoakum, Edward W.	☐ DEFELE	1 I TITLE 1.2 NAME		Change
STREET ADDRESS	605 LEWIS ST.		1.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	FRUITLAND PARK FL D	DELFTE	1.4 CHY+ST-ZIF 2 1 TITLE		Change Addition
NAME	YOAKUM, SHERYLL L.		2.2 NAME		
SPREED ADDRESS	605 LEWIS ST.		2.3 STREET ADDRESS		
CITY - ST - ZiF	FRUITLAND PARK FL		24 CITY - ST - ZIP		
TITLE NAME		DEFELE	3 1 TITLE		Change Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-7IP			34 C/TY - S1 - ZIP		
II'LE	1, 1,	DELF1E	4 1 TITLE	The state of the s	Change Addition
NAML			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - S1 - ZIP Tille		DELETE	4.4 CITY - ST - ZIF 5.1 TILLE		☐ Change ☐ Addition
NAME			5.2 NAME		□ Surange □ Adoption
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - \$1 - ZIP		
TITLE		☐ D€LETE	6 1 TITLE		Change Addition
			6.2 NAME		
NAME			U Z WAWE		

(CITY-S1-2IP)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 changes or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylor Prices