## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # L03668**

1. Entity Name OAK HILL PLANTATION, INC.



**FILED** Feb 19, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

P.O. BOX 191 **106 HATLEY STREET SE** JASPER, FL 32052 US Mailing Address

P.O. BOX 191 **106 HATLEY STREET SE** JASPER, FL 32052 US



DO NOT WRITE IN THIS SPACE

02162007 No Chg-P	CR2E034 (11/05)		
4. FEI Number		Applied For	
59-2964533		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional	

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

RATLIFF, RONALD H 4466 US HWY 41 S JASPER, FL 32052

## 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.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	i Agent signeture	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	Election Campaign Financ     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000639668 02/28/07-80037-003 150.00		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RATLIFF, RONALD H 4466 US HWY 41 SOUTH JASPER, FL 32052						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOODY, JAMES M 1500 COUNTY ROAD 6 EAST JASPER, FL 32052		DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** 

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald H. Ratliff/President

2/16/07

386-792-2532

Daytime Phone #