

# 2001 UNIFORM BUSINESS REPORT (UBR)

003133 AB

DOCUMENT # L95000000609

1. Entity Name  
OAKHILL GROUP, L.C.

FILED

01 JAN 29 PM 12:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
43 CHIPMUNK CROSSING DR.  
TINMOUTH VT 05773-1179

Mailing Address  
43 CHIPMUNK CROSSING DR.  
TINMOUTH VT 05773-1179

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 65-0600072

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WACKEEN, W. THOMAS  
1100 SOUTH FEDERAL HWY  
STUART FL 34994

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

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

900003654899--9  
--02/06/01--01105--019  
\*\*\*\*\*55.00 \*\*\*\*\*55.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
NOBLE, ROBERT A JR.  
43 CHIPMUNK CR DR  
TINMOUTH VT 05773-1179 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
MARSHALL, JAMES G  
107 COUNTRY CLUB ROAD  
QUEENSBURY NY 12804 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEM  
HIGLEY, GARY A  
138 QUAKER ROAD  
QUEENSBURY NY 12804 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEM  
MAYNARD, DON F  
8204 KIAWAH TRACE  
PORT ST. LUCIE FL 34986 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
7421 LAURELS PLACE  
PORT ST LUCIE FLA 34986 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEM  
SCHUPP, DONALD E  
234 OVERBROOK RD.  
VALENCIA PA 16058 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEM  
CHASE MANHATTAN BANK, N.A.(F.H. MUSSELMAN)  
P.O. BOX 183, OAK POINT  
HAMMOND NY 13646 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ROBERT A. NOBLE JR

1/14/01

802-446-3587

CR2E083 (11/00)