2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 8:00 am Secretary of State

DOCUMENT # M91763 1. Entity Name OXFORD RESOURCES, INC.						04-18-2005 90318 021 ***150.00				
Principal Place of Business 7858 INDUSTRIAL PARKWAY PLAIN CITY, OH 43064			Mailing Address 7858 INDUSTRIAL PARKWAY PLAIN CITY, OH 43064			50037330				
·2. Principal Pl	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			4012005	Chg-P	CR2E0	34 (10/03)	
City & State		City & State	City & State		4.	FEI Number				plied For t Applicable
Zip	Country	Zip	Coun	try	5.	Certificate of	of Status Desired	□ .	\$8.75 Add Fee Required	
	6. Name and Address of Curre	nt Registered Agent			7.	Name and	Address of New	Registered	Agent	
CICORP	ORATION SYSTEM			Name						
1200 SOU	TH PINE ISLAND ROAD ON, FL 33324		Street Address			(P.O. Box Number is Not Acceptable)				
				City					Zip Code	
								FL	• `	
the obligati	named entity submits this statementions of registered agent.	t for the purpose of changing its	register	ed office or re	egistered a	gent, or both	n, in the Stat e of F	lorida. I am	familiar with,	and accept
SIGNATURE_	Signature, typed or printed name of registered ag	ent and title if applicable, (NOT)	E: Registere	d Agent signature	e required when	reinstating)		. DATE		
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$55	9. Election Campai Trust Fund Cont		ncing	\$5.00 Added to	May Be Fees				
10.	OFFICERS AN	ND DIRECTORS	11.			DDITIONS/0	CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTCE DAVIS, S. ROBERT 5695 AVERY ROAD DUBLIN, OH 43016	☐ Delete		I .	Plain	Indus City, 0	burt Kvinl Park h:o 4306	way >4	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS ASMO, RANDALL J 5695 AVERY ROAD DUBLIN, OH 43016	□ Delete		I	285 8	dent , Rand Indus , City	all J. Strial Parley Disio 47	way 3064	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO POTTER, WILLARD E 7858 INDUSTRIAL PARKWAY PLAIN CITY, OH 43064	□ belete	1						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP		☐ Delete			CFO Ted 785 Plai	Booth 8 Ind u City	n ustrial Par 1842 4	teway 3064	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							□ Change	☐ Addition
12. I hereby of indicated	certify that the information supplied of this report or supplemental repo	with this filing does not qualify for	r the exe	mption stated	ed in Section	119.07(3)(i), Florida Statutes as if made under	. I further cer	rtify that the ir	nformation 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.

SI	G١	ΙΑΊ	ГU	RE	: -
	•	-	•		

Tool Broth CFO Ted

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ted Booth

414/05

6H-873-7943

Daytime Phone #