2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002853

Entity Name: THE OAK RUN VETERANS ASSOCIATION, INC.

FILED Jan 08, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
10881 SW 89TH AVE OCALA, FL 34481				10874 SW 87TH TERRACE OCALA, FL 34481			
Current Mailing Address:				New Mailing Address:			
10881 SW 89TH AVE OCALA, FL 34481				10874 SW 87TH TERRACE OCALA, FL 34481			
FEI Number:	01-0670614	FEI Number Applied For ()	FEI Numb	ber Not Appli	cable ()	Certificate of Status De	sired()
Name and	Address of C	urrent Registered Agent:	ı	Name and	Address of N	ew Registered Ager	nt:
OCALA, FL	87TH TERR 34481 US	ubmits this statement for the pu	rpose of	changing it	s registered o	ffice or registered age	ent, or both,
in the State	of Florida.	·	•	0 0	J	0 0	,
SIGNATUR							
Electronic Signature of Registered Agent				Date			
OFFICERS	AND DIRECT	rors:	/	ADDITION	S/CHANGES	TO OFFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () KRISHKO, FRAN 10881 SW 89TH OCALA, FL 344	AVE	N A	Title: Name: Address: City-St-Zip:	PD (X) ZINCK, RICHAR 7935 SW 115TH OCALA, FL 344	H LOOP	
Title: Name: Address: City-St-Zip:	STD () HERR, RICHARI 10874 SW 87TH OCALA, FL 344	ITERR	N A	Title: Name: Address: City-St-Zip:	STD (X) HERR, RICHAR 10874 SW 87TH OCALA, FL 344	HTERR	
Title: Name: Address: City-St-Zip:	VP () ZINCK, RICHAR 7935 SW 115TH OCALA, FL 344	LOOP	N #	Title: Name: Address: City-St-Zip:	VP (X) WHEELING, LY 8556 SW 109TH OCALA, FL 344	H LANE RD	
Title: Name: Address: City-St-Zip:	D () MCBRIDE, RAYI 8583 SW 109TH OCALA, FL 344	I LANE RD.	N A	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () HARTMAN, ALBI 6334 SW 117TH OCALA, FL 344	LOOP	N A	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () RIKER, ANDREV 11421 SW 85TH OCALA, FL 344	COURT	N #	Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD L. HERR STD 01/08/2004