

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007082

FILED
Apr 23, 2009
Secretary of State

Entity Name: OXFORD ADOPTION FOUNDATION, INC.

Current Principal Place of Business:

4309 CRAYTON RD.
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

4309 CRAYTON RD.
NAPLES, FL 34103

New Mailing Address:

FEI Number: 20-0159592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNIGHT, JAMIE
4309 CRAYTON RD.
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WISE, MURRAY R
Address: 4309 CRAYTON RD.
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: WISE, VALERIE G
Address: 4309 CRAYTON RD.
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: POPE, RANDALL E
Address: 2110 WINTERHAVEN
City-St-Zip: JONESBORO, AR 72404

Title: D () Delete
Name: JAGER, MARCIA J
Address: 1115 EMERALD BAY
City-St-Zip: LAGUNA BCH, CA 92660

Title: D () Delete
Name: MCPEAK, NANCY
Address: 9566 GULFSHORE DR., PH4
City-St-Zip: NAPLES, FL 34108

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KLEIN, DEBBIE
Address: 4309 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34103

Title: D (X) Change () Addition
Name: BIDDLE, DANNY
Address: 4309 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34103

Title: D (X) Change () Addition
Name: MCPEAK, NANCY
Address: 4309 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34103

Title: D () Change (X) Addition
Name: ANDERSON, ALEX
Address: 4309 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MURRAY R. WISE

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date