

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

9/8/2008-90002-041-\$61.25-\$61.25

FILED

08 NOV -5 PM 12:41

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N07000004208

1. Entity Name
OAK HILL COMMUNITY TRUST, INC.



Principal Place of Business
234 SOUTH U.S. HWY #1
OAK HILL, FL 32759

Mailing Address
234 SOUTH U.S. HWY #1
OAK HILL, FL 32759

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

P.O. Box 11

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

OAK Hill, FL

Zip

Country

Zip

Country

32759

FLORIDA

090320

REINSTATEMENT

08

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIMPSON, SCOTT E
595 W GRANADA BLVD SUITE A
ORMOND BEACH, FL 32174

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. 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 Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP
CHAIRPERSON
GARY BATTLE
2911 LAGOON AVE
OAK HILL, FL 32759

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP
VICE-CHAIRPERSON
DANA THOMPSON
219 N. GAINES ST.
OAK HILL, FL 32755

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP
TREASURER
ROBERTA SIMMONS
197 S. GAINES ST.
OAK HILL, FL 32759

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP
SECRETARY
CHRISTINA FAYEE
105 OAK ST
ORLANDO, FL 32141

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP
BOARD MEMBER
ALBERT JUAN
170 WOODS ST.
OAK HILL, FL 32759

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP
BOARD MEMBER
JIM BONEFIELD
2260 LAGOON AVE
OAK HILL, FL 32759

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-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 617, 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:

GARY BATTLE

GARY BATTLE

09/08/08

386-416-9277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #