

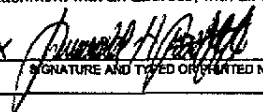


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 09, 2006 08:00 AM
Secretary of State**

DOCUMENT # N35849		
1. Entity Name OAK HILL PLANTATION PROPERTY OWNERS ASSOCIATION, INC.		
Principal Place of Business 106 HATLEY STREET SE JASPER, FL 32052	Mailing Address PO BOX 191 JASPER, FL 32052	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RATLIFF, RONALD H 4466 US HWY 41 S. JASPER, FL 32052		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RATLIFF, RONALD H PO BOX 191 JASPER, FL 32052	 01062006 No Chg-NP CR2E037 (11/05) 4. FEI Number 59-3054841 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 1100000380458 01/11/06-80014-022 61.25 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MOODY, JAMES M PO BOX 191 JASPER, FL 32052	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RATLIFF, VICKIE L 4466 US HWY 41 S JASPER, FL 32052	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-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: <i>X</i>  <i>Ronald H. RATLIFF</i>		1/6/06 386-792-8484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #