

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003843

FILED
Apr 28, 2006
Secretary of State

Entity Name: OAKLAND NATURE PRESERVE, INC.

Current Principal Place of Business:

747 MACHETE TRAIL
OAKLAND, FL 34760

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 841
OAKLAND, FL 34760

New Mailing Address:

FEI Number: 59-3464532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASSEWER, MARIC
747 MACHETE TRAIL
OAKLAND, FL 34760 US

Name and Address of New Registered Agent:

THOMAS, JAMES
747 MACHETE TRAIL
OAKLAND, FL 34760 US

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: JAMES THOMAS

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMAS, JAMES
Address: 14908 TIDEN RD.
City-St-Zip: WINTER GARDEN, FL 34787

Title: VPD () Delete
Name: ROLF, KUHNS
Address: 17569 SEIDNER
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD () Delete
Name: DEAM, NANCY
Address: 17569 SEIDNER RD
City-St-Zip: WINTER GARDEN, FL 34789

Title: C () Delete
Name: MERRITT, FRANK
Address: 32 OAKLAND POINTE
City-St-Zip: OAKLAND, FL 34760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: THOMAS, JAMES M
Address: 14908 TIDEN RD.
City-St-Zip: WINTER GARDEN, FL 34787

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TOM RODRIGUEZ

E.D.

04/28/2006

Electronic Signature of Signing Officer or Director

Date