2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 08, 2007 08:00 AM Secretary of State

Daytime Phone #

DOCUMEN 1. Entity Name OAKHURST RE	T # P0000000004 ALTY, INC.	43					ny oi Sta
Principal Place of Busin 13051 PARK BLVD SEMINOLE, FL 33776		Mailing Address 13051 PARK BLVD SEMINOLE, FL 33776					
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				01042007 No Chg-P CR2E034 (11/05) 4. FEI Number			
LURIE, VIVIAN E 13051 PARK BLVI SEMINOLE, FL 3	DO NOT WRITE IN THIS SPACE						
8. The above named eithe obligations of reg	ntity submits this statement for the sistered agent.	Quie X	WELL ad Agent signature required	-		orida. I am fami - 4- 0 DATE	
After May 1, 20	!! FEE IS \$150.00 107 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution		.00 May Be led to Fees	,		
STREET ADDRESS 13051 I	OFFICERS AND DIRI VIVIAN E PARK BLVD OLE, FL 33776	ECTIONS			U0000 01/09/07	0577985 -80011-0	10 150.00
IIILE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS			-		NOT W		
CITY-ST-ZIP TITLE NAME STREEI ADDRESS CITY-ST-ZIP IITLE NAME ' STREET ADDRESS			-				•
City-Sr-ZiP I hereby certify that indicated on this re of the corporation changed, or on an	the information supplied with this port or supplemental report is true in the receiver or trustee empower attachment with an address, with	filing does not qualify for the execute and accurate and that my signal ed to execute this report as requall other like empowered.	temptions contained shall have the sired by Chapter 607	d in Chapter 119 same legal effec 7, Florida Statute	i. Florida Statutes. It as if made under s; and that my nam	further certify to oath; that I am a e appears in Bk	hat the information in officer or director ock 10 or Block 11 if