

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P01000119187**

1. Entity Name

OAK PARK OF BREVARD, INC.

Principal Place of Business

**1221 EAST NEW HAVEN AVE
MELBOURNE FL 32901**

Mailing Address

**1221 EAST NEW HAVEN AVE
MELBOURNE FL 32901**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-3001244

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MOSLEY, CURSTIS R
1221 EAST NEW HAVEN AVE
MELBOURNE FL 32901**

7. Name and Address of New Registered Agent

Name
JOHN H. SOTTILEStreet Address (P.O. Box Number is Not Acceptable)
100 RIALTO PLACE SUITE 500City
MELBOURNE**FL**Zip Code
32901

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.

SIGNATURE:

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating.)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SOTTILE, JOHN H
100 RIALTO PLACE STE 500
MELBOURNE FL 32901** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SEVERS, DWIGHT W
100 RIALTO PLACE STE 500
MELBOURNE FL 32901** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FAZZINI, JOHN P
100 RIALTO PLACE STE 500
MELBOURNE FL 32901** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SOTTILE, JOHN H
100 RIALTO PLACE SUITE 500
MELBOURNE, FL 32901** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTAS
WHERRY STEPHEN R
100 RIALTO PLACE SUITE 500
MELBOURNE, FL 32901** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BRASELTON, WILLIAM
100 RIALTO PLACE SUITE 500
MELBOURNE, FL 32901** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
STRANGE, PATRICIA A
100 RIALTO PLACE SUITE 500
MELBOURNE, FL 32901** ☐ Change ☒ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/22/02**321-724-7700****FILED**
May 21, 2002 8:00 am
Secretary of State

04-22-2002 90291 011 ***150.00

DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)