2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)



1/1

FILED Feb 14, 2003 8:00 am Secretary of State 01-16-2003 90182 001 ***225.00

1. Entity Name WHITE OAK TRAIL - MLC, INC.							٠					
Principal Place of Business 13400 SUTTON PARK DRIVE SOUTH SUITE 1402 JACKSONVILLE FL 32224 2. Principal Place of Business		Mailing Address 13400 SUTTON PARK DRIVE SOUTH SUITE 1402 JACKSONVILLE FL 32224										
		3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES A FEL Number Applied For					
City & State		City & State				4. FEI Number 64 - 36557			09	No	t Applicable	
Zip Country		Zip Coun			try	5. Certificate of Status Desired Fee Required						
	6. Name and Address of Current	Registered	Agent ~		Name		7Name and	Address of Ne	w Registere	d Agent:		
	AND THE RESERVE AND ADDRESS OF THE PARTY OF											
MONTGOMERY, MITCHELL R 13400 SUTTON PARK DRIVE SOUTH					. Street Address (P.O. Box Number is Not Acceptable)							
SUITE 1402												
	ALLE FL 32224				City	City			F	FL Zip Code		
SIGNATURE _	ons of registered agent. Signature, typed or printed name of registered agent ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 t Payable to Florida Department of	of State				re required v	Tr	lection Campaignust Fund Contrib	ution.	\$5.0 Added	May Be to Fees	
10.	OFFICERS AND	DIRECTOR	S	11. 1 TL			ADDITIONS	CHANGES TO	SI TIOLITO A	Change	Addition	
name Street address	D MONTGOMERY, MITCHELL R 13400 SUTTON PARK DRIVE SO JACKSONVILLE FL 32224	UTH #140	_	NAA Str		4 27					☐ Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	;		☐ Delete			yma yma yar Ta	700 Su	4106 mg	h k br	□ Change S≠/9	02	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		· · · ·	Delete			VP Pa	tsy A	. Hit e		Change	Acaddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					· - ,		☐ Change	Addition	
TITLE NAME STREET ADDRESS CUTY-ST-7IP	certify that the information supplied wi	sh shr:- £0	Delete	CIT	ME Reet adoress , Y-ST-ZIP	ted in Se	ction 119 07/3	IVi). Florida Statu	tes. I further	Change	☐ Addition	

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Fituriner 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: