2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000072038

City-St-Zip: MUSKOGEE, OK 74402

ntity Name: OLD BRIDGE VILLAGE PARTNERS. INC

FILED Jul 13, 2004 Secretary of State

Entity Nai	me: OLD BR	IDGE VILLAGE PARTNERS, IN	NC.				
Current Principal Place of Business:			New Prin	New Principal Place of Business:			
	F OF MEXICO AT KEY, FL 3			5871 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228			
Current M	lailing Addre	ss:	New Mai	New Mailing Address:			
4235 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228				5871 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228			
FEI Number:	: 06-1649991	FEI Number Applied For()	FEI Number Not Ap	plicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name an	Name and Address of New Registered Agent:			
BRADENT	D AVE W ST ON, FL 3420	5 US					
	named entity e of Florida.	submits this statement for the p	purpose of changing	its registere	ed office or registered agent, or	both,	
SIGNATU	RE:						
	Electro	nic Signature of Registered Ag	ent	Date			
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution().	ot receive the prior not	ice.			
OFFICERS	S AND DIREC	CTORS:	ADDITIO	NS/CHANG	ES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	PALMER, CHA	F MEXICO DRIVE	Title: Name: Address: City-St-Zip:		(X) Change () Addition CHARLES F OF MEXICO DRIVE T KEY, FL 34228		
Title: Name: Address: City-St-Zip:	S (ALFORD, JOH 6301 CLIFF D FORT SMITH,	RIVE	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address:	VP (ROBERTS, CA P.O. BOX 186		Title: Name: Address:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CHARLES PALMER P 07/13/2004