

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095127

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** BLACK OAK INDUSTRIES, INC.

**Current Principal Place of Business:**

5799 N. BLACK OAK LAKE ROAD  
LAND O' LAKES, WI 54540 US

**New Principal Place of Business:**

6745 WINTERSET GARDENS ROAD  
WINTER HAVEN, FL 33884 US

**Current Mailing Address:**

5799 N. BLACK OAK LAKE ROAD  
LAND O' LAKES, WI 54540 US

**New Mailing Address:**

6745 WINTERSET GARDENS ROAD  
WINTER HAVEN, FL 33884 US

**FEI Number:** 36-4506718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEVEN, BATES H  
317 RUBY LAKE LOOP  
WINTER HAVEN, FL 33884 US

**Name and Address of New Registered Agent:**

STEVEN, BATES H  
6745 WINTERSET GARDENS ROAD  
WINTER HAVEN, FL 33884 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:** STEVE BATES

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BATES, STEVEN H  
**Address:** 6745 WINTERSET GARDENS ROAD  
**City-St-Zip:** WINTER HAVEN, FL 33884

**Title:** VSTD  
**Name:** BATES, LISA A  
**Address:** 6745 WINTERSET GARDENS ROAD  
**City-St-Zip:** WINTER HAVEN, FL 33884

I hereby 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 all other like empowered.

**SIGNATURE:** LISA BATES

VSTD

02/28/2011

Electronic Signature of Signing Officer or Director

Date