

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065076

Entity Name: OAKVIEW LAND COMPANY

FILED  
Jan 13, 2004  
Secretary of State

**Current Principal Place of Business:**

926 MISTY MOUNTAIN DRIVE WEST  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

926 MISTY MOUNTAIN DRIVE WEST  
JACKSONVILLE, FL 32225

**New Mailing Address:**

FEI Number: 58-2673402

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOWARD A. CAPLAN, ATTORNEY, P.A.  
3900 ATLANTIC BLVD  
JACKSONVILLE, FL 32207 US

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

HOWARD A. CAPLAN, ATTORNEY, P.A.  
6260 DUPONT STATION COURT  
SUITE C  
JACKSONVILLE, FL 32217 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/13/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST ( ) Change (X) Addition  
Name: BYRNES, BARBARA J  
Address: 926 MISTY MOUNTAIN DR. W.  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: D ( ) Change (X) Addition  
Name: BYRNES, BARBARA J  
Address: 926 MISTY MOUNTAIN DR. W.  
City-St-Zip: JACKSONVILLE, FL 32225 US

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.

SIGNATURE: BARBARA J. BYRNES

Electronic Signature of Signing Officer or Director

PRES

01/13/2004

Date