## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116648

Entity Name: OLDFIELD SHOPPES, INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3960 S. 3RD STREET

JACKSONVILLE BEACH, FL 32250

8024 WANDERING DEER CT

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

P O BOX 528 PONTE VEDRA, FL 32004

FEI Number: 61-1454253 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SIMMONS, J. ALLYN
3960 S. 3RD STREET
JACKSONVILLE BEACH, FL 32250 US
SIMMONS, J. ALLYN
8024 WANDERING DEER CT
JACKSONVILLE, FL 32256 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: JALLYN SIMMONS 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

 Name:
 SIMMONS, J. AQLLYN
 Name:
 SIMMONS, J. ALLYN

 Address:
 P.O. BOX 528
 Address:
 P.O. BOX 528

City-St-Zip: PONTE VEDRA BEACH, FL 32004 City-St-Zip: PONTE VEDRA BEACH, FL 32004

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: J ALLYN SIMMONS PRES 04/30/2005