## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000018232

BUSHNELL, FL 33513

City-St-Zip:

Entity Name: BUSHNELL MAJESTIC OAKS, INC.

FILED May 07, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6836 SW 19TH DR BUSHNELL, FL 33513 **Current Mailing Address: New Mailing Address:** POB 2693 BUSHNELL, FL 33513 FEI Number: 26-2315117 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: SCHUH, HAROLD A 6836 SW 19TH DR BUSHNELL, FL 33513 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 Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SCHUH, HAROLD A Name: Name: POB 2693 Address: Address: City-St-Zip: BUSHNELL, FL 33513 City-St-Zip: Title: STD Title: () Change () Addition () Delete SCHUH, SHIRLEY L Name: Name: POB 2693 Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: HAROLD A. SCHUH PRES 05/07/2009