

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000015342

FILED
Jan 20, 2003
Secretary of State

Entity Name: NORTHEAST OAKS, INC.

Current Principal Place of Business:

300 34TH AVE., NORTH
SAINT PETERSBURG, FL 33704

New Principal Place of Business:

Current Mailing Address:

300 34TH AVE., NORTH
SAINT PETERSBURG, FL 33704

New Mailing Address:

FEI Number: 59-3171689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HONESS, BARBARA
4639 DARTMOUTH AVE
SAINT PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSDC () Delete
Name: HONESS, BARBARA L
Address: 300 34TH AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL

Title: VPD () Delete
Name: VANWART, ROBERT
Address: 3649 HAINES ROAD
City-St-Zip: ST. PETERSBURG, FL 33704

Title: D () Delete
Name: DUAK, JEFF P
Address: 427 BRITTNEY CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: VANWART, ROBERT
Address: 4639 DARTMOUTH AVE
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D (X) Change () Addition
Name: BUAK, JEFF P
Address: 206 DOVERWOOD RD
City-St-Zip: FERN PARK, FL 32730

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 L HONESS

PRES

01/20/2003

Electronic Signature of Signing Officer or Director

Date