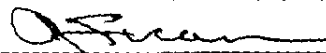


Jan 13, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000057381			
1. Entity Name OAKWOOD PROPERTIES, INC.			
Principal Place of Business 1520 GULF BOULEVARD PENTHOUSE 1 CLEARWATER, FL 33767 US	Mailing Address 1520 GULF BOULEVARD PENTHOUSE 1 CLEARWATER, FL 33767 US		
DO NOT WRITE IN THIS SPACE		01052006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 58-3195008 ☐ Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent FICARA, ANTHONY J 1520 GULF BLVD - PH 1 CLEARWATER, FL 33767		DO NOT WRITE IN THIS SPACE	
9. 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. I am familiar with and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered agent signature required when remaining) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD FICARA, ANTHONY J 1520 GULF BOULEVARD, PENTHOUSE 1 CLEARWATER, FL 33767		
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer 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 in Block 10 or changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____			

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01/18/06-80049-004 150.00

DO NOT WRITE
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