

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000007656

Entity Name: OAK GROVE FERNERY, INC.

FILED
Apr 04, 2004
Secretary of State

Current Principal Place of Business:

907 WEBSTER ST
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 492722
LEESBURG, FL 347492722

New Mailing Address:

FEI Number: 59-3225894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSS, GEORGE H
907 WEBSTER ST
LEESBURG, FL 34748

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: V () Delete
Name: KING, ISHAM
Address: 9205 FERNERY ROAD
City-St-Zip: LEESBURG, FL 34788

Title: PD () Delete
Name: SUMMERLIN, CANDACE K
Address: 9210 FERNERY ROAD
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VST (X) Change () Addition
Name: KING, ISHAM
Address: 9205 FERNERY ROAD
City-St-Zip: LEESBURG, FL 34788

Title: PD (X) Change () Addition
Name: SUMMERLIN, CANDACE K
Address: 9210 FERNERY ROAD
City-St-Zip: LEESBURG, FL 34788

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: CANDACE M. SUMMERLIN

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04/04/2004

Electronic Signature of Signing Officer or Director

_____ Date