

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90128 007 \*\*\*150.00

**DOCUMENT # P94000022414**

1. Entity Name  
**OAK HARBOR COMMUNITY DEVELOPMENT, INC.**



Principal Place of Business  
**2121 GRAND HARBOR BLVD.  
VERO BEACH FL 32967**

Mailing Address  
**2121 GRAND HARBOR BLVD.  
VERO BEACH FL 32967**

**11029394**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
**3755 7th Terrace**

3. Mailing Address  
**3755 7th Terrace**

Suite, Apt. #, etc.  
**Suite 301**

Suite, Apt. #, etc.  
**Suite 301**

City & State  
**Vero Beach, FL**

City & State  
**Vero Beach, FL**

4. FEI Number  
**65-0482045**

Applied For  
☐ Not Applicable

Zip  
**32960**

Country  
**US**

Zip  
**32869**

Country  
**US**

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**HENN, PETER J  
2121 GRAND HARBOR BLVD.  
VERO BEACH FL 32967**

Name  
**Henn, Peter J.**

Street Address (P.O. Box Number is Not Acceptable)  
**3755 7th Terrace, Suite 301**

City  
**Vero Beach, FL**

Zip Code  
**FL 32960**

8. 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 title if applicable.

**PETER J. HENN**

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VS NORTH, ANNABEL 3755 7TH TERR STE 301 VERO BEACH FL 32960</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D STOREVEDT, JAN PETTER 2121 GRAND HARBOR BLVD. VERO BCH FL 32967</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD HENN, PETER J. 2121 GRAND HARBOR BLVD. VERO BCH FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TV MCLAIN, MARY 3755 7TH TERR STE 301 VERO BEACH FL 32960</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S North, Annabel 3755 7th Terrace, Suite 301 Vero Beach, FL 32960</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Storetvedt, Jan Petter 3755 7th Terrace, Suite 301 Vero Beach, FL 32960</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD Henn, Peter J. 3755 7th Terrace, Suite 301 Vero Beach, FL 32960</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

**SIGNATURE REQUIRED**  
**PETER J. HENN**

Date

Daytime Phone #

**772-778-0180**

CR2E034 (10/02)