## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT
CORPORATION
ANNUAL REPORT
1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 15 1998 8:00am

Secretary of State

19/18

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000081446 (4)

OXFORD PRE-SCHOOL ACADEMY, INC.

1503 57TH A	/E WEST	1509 57TH AVE WEST				
301 BRADENTON FL 34207		301 BRADENTON FL 34207		DO NOT WRITE IN THIS SPACE		
US	PL 94207	US		3. Date Incorporated or Qualified		
				11/07/1994		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0536716	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	irrent year Intangible	
24	25	29 3	0		Yes No	
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
CLARK, KATHRYN			81 Name			
150	3 57TH AVE WEST		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
BR	ADENTON FL 34207		<u> </u>			
			83		i	
			84 City		85 Zip Code	
			1 1	Fi.	<b>-</b>   `   `	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
<del></del>	Signature, typed or printed name of registered ag-		tegistered Agent signature re	· · · · · · · · · · · · · · · · · · ·		
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PSD	☐ DELETE	1.1 TITLE		L. Change L. Addition	
NAME	CLARK, JOHN T		1.2 NAME			
STREET ADDRESS	1503 57TH AVE W		1.3 STREET ADDRESS			
CITY-ST-ZIP	<b>BRADENTON FL</b>		1.4 CITY-ST-ZIP			
TITLE	VTD	☐ DELETE	2.1 TITLE		Change Addition	
NAME	ÇLARK, KATHRYN		2.2 NAME		İ	
STREET ADDRESS	1503 57TH AVE W		2.3 STREET ADDRESS			
CITY-ST-ZIP	<b>BR</b> ADENTON FL		2. 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE	•	Change Addition	
NAME	-		3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELET <b>E</b>	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify for t	he exemption stated	in Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information	
Indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.						