

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

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90175 046 ***150.00

DOCUMENT # **95000027696**

1. Entity Name
OKY CORP OF THE SOUTH EAST



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1193 Autumn Breeze Cir

3. Mailing Address
1193 Autumn Breeze Cir

DO NOT WRITE IN THIS SPACE

City & State
Gulf Breeze FLA.

City & State
Gulf Breeze FLA

4. FEI Number
59-3325812

Applied For
 Not Applicable

Zip
32563

Country
USA

Zip
32563

Country
USA-

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
George D. Thuesen

Street Address (P.O. Box Number is Not Acceptable)
1193 Autumn Breeze Cir

City
Gulf Breeze FLA FL

Zip Code
32563

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 **George D. Thuesen** (George D Thuesen)
PRESIDENT

DATE **4/15/03**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 | | | |
|--|---|--|---------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PRESIDENT George D. Thuesen 1193 Autumn Breeze Cir Gulf Breeze FLA 32563 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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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 on an attachment with an address, with all other like empowered.

SIGNATURE **George D. Thuesen** (George D. Thuesen) **PRESIDENT** **4/15/03** **(850) 934-7475**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)