

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040302 (8)

1. Corporation Name
OOLEY, INC.



Principal Place of Business

5757 BENEVA RD S
UNIT 4
SARASOTA FL 34231

Mailing Address

5757 BENEVA RD S
UNIT 4
SARASOTA FL 34231

2. Principal Place of Business

2a. Mailing Address

21 2522 Club House DR
State, Apt., etc.

26 2522 Club House DR
State, Apt., etc.

22 City & State
Sarasota

27 City & State
Sarasota, FL

23 Zip
34232

28 Zip
34233

24 County
Sarasota

29 County
Sarasota

9. Name and Address of Current Registered Agent

PREWETT, DANIEL L
5757 BENEVA RD S
UNIT 4
SARASOTA FL 34231

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1705, 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

(Signature of person accepting appointment as registered agent)

(Signature of person accepting appointment as registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	PREWETT, DANIEL L	☒ DELETE
NAME		5757 BENEVA RD S UNIT 4	
STREET ADDRESS		SARASOTA FL 34231	
CITY-STATE-ZIP			
TITLE		Donald Ooley	☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE		Pres/VP/Treas/Sec/Director	☐ DELETE
NAME		Donald Ooley	
STREET ADDRESS		2522 Club House DR	
CITY-STATE-ZIP		SARASOTA, FL 34231	
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☒ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-STATE-ZIP	
25. TITLE	☐ Change ☐ Addition
26. NAME	
27. STREET ADDRESS	
28. CITY-STATE-ZIP	
29. TITLE	☐ Change ☐ Addition
30. NAME	
31. STREET ADDRESS	
32. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Donald Ooley Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD OOLEY

4/4/96 941-924-7429

CR2E034 (12/95)