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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000050036 (9)**

1. Corporation Name

OCEAN OAKS, INC.



Principal Place of Business

**9080 GOLFSIDE DRIVE
JACKSONVILLE FL 32256**

Mailing Address

**9080 GOLFSIDE DRIVE
JACKSONVILLE FL 32256**

3. Date Incorporated or Qualified

06/26/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**DOSTIE, RENE JR.
9080 GOLFSIDE DRIVE
JACKSONVILLE FL 32256**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

(Signature type for provisions of Chapter 607, Florida Statutes)

(Print Name, Address, and Signature of Registered Agent)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	DOSTIE, RENE JR.	
STREET ADDRESS	9080 GOLFSIDE DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE	P	☐ DELETE
NAME	ATKERSON, CHARLES	
STREET ADDRESS	9080 GOLFSIDE DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE	ST	☐ DELETE
NAME	DEWS, JEANNIE C	
STREET ADDRESS	9080 GOLFSIDE DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-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)(k), 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:

(Signature type for provisions of Chapter 607, Florida Statutes)

RENE DOSTIE, JR.

4-26-96

904-737-6900

(Date)

(Telephone Number)

CR2E034 (12/95)