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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

FILED

Jan 22 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P96000031422 (4) DOCUMENT

OAK CREEK GALLERY, INC.

officer or director of the corpora Block 12 or Block 13 if change

Mailing Address Principal Place of Business 10998 BONITA BEACH ROAD 10998 BONITA BEACH ROAD **BONITA SPRINGS FL 34135 BONITA SPRINGS FL 33923** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>04/05/1996</u> 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0665745 Not Applicable 26 \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 28 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CARPENTER, SUE ANN 27152 EDEN BRIDGE COURT Street Address (P.O. Box Number is Not Acceptable) BONITA SPRINGS FL 33928-34135 83 84 City Zip Code 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 amiliar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE le il applicable (NO16: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE CARPENTER, SUEANN 1.2 NAME NAME 10998 BONITA BEACH RD STREET ADDRESS 1.3 STREET ADDRESS **BONITA SPRINGS FL** 1.4 CITY-ST-ZIP CITY - ST- ZIP Addition DELETE Change TITLE VP 2.1 TITLE CARPENTER, ROBERT NAME 10998 BONITA BEACH ROAD STREET ADDRESS 2.3 STREET ADDRESS **BONITA SPRINGS FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREE1 ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change ☐ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby certify that the information indicated on this annual report of the corporations of the corporations of the corporation. 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 repoplemental 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 ion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or on an attachment with an address.