

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90025 008 ***550.00

DOCUMENT # P98000074074

1. Entity Name
OAKLEY INVESTMENTS, INC.



Principal Place of Business Mailing Address
 5633 NUTMEG AVE 5633 NUTMEG AVE
 SARASOTA FL 34231 SARASOTA FL 34231

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. **5638 NUTMEG AVE.**
 Suite, Apt. #, etc.

City & State City & State
SARASOTA, FL.

Zip Country Zip Country
34231 USA

4. FEI Number Applied For
65-0917395 Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

OAKLEY, GARY T
5633 NUTMEG AVE
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name **JEFFERY OAKLEY**
 Street Address (P.O. Box Number is Not Acceptable) **5638 NUTMEG AVE.**
SARASOTA,
 City **FL** Zip Code **34231**

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.

SIGNATURE *Jeffery Oakley* **8-29-00**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D OAKLEY, GARY T 5633 NUTMEG AVE SARASOTA FL 34231	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D OAKLEY, JEFFREY R 5633 NUTMEG AVE 5638 NUTMEG AVE. SARASOTA FL 34231	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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CR2E034 (5/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jeffery Oakley*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-29-00
 Date

941-925-0647
 Daytime Phone #