

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # S51577 (2)

1. Corporation Name

OAKWOOD CENTER INVESTMENTS, INC.



Principal Place of Business

1300 S. HIGHLAND AVE.  
CLEARWATER FL 34616  
US

Mailing Address

1300 S HIGHLAND AVE  
CLEARWATER FL 34616  
US

3. Date Incorporated or Qualified  
05/10/1991

3a. Date of Last Report  
02/27/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number  
59-4075117

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROMAN, TOM  
2340 MAIN ST  
SUITE L  
DUNEDIN FL 34698

10. Name and Address of New Registered Agent

81 Name Michael J. Daly  
82 Street Address (P.O. Box Number is Not Acceptable)  
8502 Van Dyke Rd.  
83 Odessa  
84 City Florida FL 85 Zip Code 33406

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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/96

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME MILNE, JAMES  
STREET ADDRESS 250 PINELLAS BAYWAY  
CITY-ST-ZIP TERRA VERDA FL

TITLE D ☐ DELETE  
NAME MCCARTHY, BARBARA  
STREET ADDRESS 7963 SAILBOAT KEY BLVD  
CITY-ST-ZIP S. PASADENA FL

TITLE D ☐ DELETE  
NAME STORM, NORMAN  
STREET ADDRESS 8020 SAILBOAT KEY BLVD  
CITY-ST-ZIP S. PASADENA FL

TITLE D ☐ DELETE  
NAME DALY, MICHAEL  
STREET ADDRESS 8502 VAN DYKE ROAD  
CITY-ST-ZIP ODESSA FL

TITLE D ☐ DELETE  
NAME GUIDE, HAROLD  
STREET ADDRESS 7872 SAILBOAT KEY BLVD  
CITY-ST-ZIP S. PASADENA FL

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 in 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

4/29/96 8139207371

CR2E034 (12/95)