

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

CORPORATION,
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Division of Corporations

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V03386

(2)

For Corporation Name

GRAND OAKS INVESTMENT COMPANY, INC.

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business HCH 1 BOX 142-B WILLCOX ZA 85643 US		2a. Mailing Address P O BOX 579 WILLCOX AZ 85644 US		3. (Date Incorporated or Qualified) 12/15/1991	3a. Date of Last Report 04/19/1994
2. Principal Place of Business 21	2b. Mailing Address 26	4. FEI Number 59-3105593		Applied For Not Applicable	
22	27	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

KELLER, JOE M.
116 BUNKERS COVE RD
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent, if registered agent is not the corporation)

(Signature of Registered Agent, if registered agent is not the corporation)

(Signature)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1. TITLE	☒ Change ☐ Addition
NAME	WHITEHURST, A.D. JR.	2. NAME	
STREET ADDRESS	HCH 1, BOX 142-B	3. STREET ADDRESS	
CITY, ST, ZIP	WILLCOX ZA	4. CITY, ST, ZIP	Willcox, AZ 85644
TITLE	VSD	5. TITLE	☐ Change ☐ Addition
NAME	KELLER, JOE M.	6. NAME	
STREET ADDRESS	116 BUNKERS COVE ROAD	7. STREET ADDRESS	
CITY, ST, ZIP	PANAMA CITY FL	8. CITY, ST, ZIP	
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	
TITLE		21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY, ST, ZIP		24. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. Further, I certify that the information indicated on this annual report or report of 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 owner or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1a, of report or on another page of this report.

SIGNATURE:

(Signature and Typed or Printed Name of Signing Officer or Director)

A.D. Whitehurst, Jr. 4/28/95 (520)384-0011

(Signature)

(Signature)