

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000013325

**Entity Name:** CORNERSTONE OF BRISTOL INC.

**Current Principal Place of Business:**

10734 NW STATE ROAD 20  
BRISTOL, FL 32321

**Current Mailing Address:**

PO BOX 204  
BRISTOL, FLORIDA, FL 32321

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

OXENDINE, RANDY  
10734 NW STATE ROAD 20  
BRISTOL, FL 32321 US

*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name OXENDINE, RANDY  
Address 20914 MORNINGSIDE CIRCLE  
City-State-Zip: BLOUNTSTOWN FL 32424

Title T  
Name OXENDINE, DONNA  
Address 20914 MORNINGSIDE CIRCLE  
City-State-Zip: BLOUNTSTOWN FL 32424

Title D  
Name ELKINS, AARON  
Address PO BOX 136  
City-State-Zip: HOSFORD FL 32334

Title S  
Name OXENDINE, DONNA  
Address PO BOX 304  
City-State-Zip: BRISTOL FL 32321

Title D  
Name WELLS, BILL  
Address PO BOX 238  
City-State-Zip: BLOUNTSTOWN FL 32424

Title D  
Name HOBBY, BILLY  
Address 19062 NW COUNTY ROAD 379A  
City-State-Zip: BRISTOL FL 32321

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RANDY OXENDINE**

**PRESIDENT**

**02/13/2025**

Electronic Signature of Signing Officer/Director Detail

Date