

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 533777

FILED
Mar 27, 2008
Secretary of State

Entity Name: OAK HILL MANAGEMENT GROUP, INC.

Current Principal Place of Business:

% CHARLES D. WINSTON
3052 TAMiami TRAIL
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

% PATRICIA S. WINSTON
21304 BERKSHIRE AVENUE
PORT CHARLOTTE, FL 33954

Current Mailing Address:

21304 BERKSHIRE AVE.
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 59-1820932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINSTON, CHARLES D
21304 BERKSHIRE AVE.
PT CHARLOTTE, FL 33954 US

Name and Address of New Registered Agent:

WINSTON, PATRICIA S.
21304 BERKSHIRE AVE.
PT CHARLOTTE, FL 33954 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: PATRICIA S. WINSTON 03/27/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVD () Delete
Name: WINSTON, CHARLES D,
Address: 21304 BERKSHIRE AVE
City-St-Zip: PT CHARLOTTE, FL 33954 US

Title: STD () Delete
Name: WINSTON, PATRICIA S,
Address: 21304 BERKSHIRE AVE
City-St-Zip: PT CHARLOTTE, FL 33954 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change () Addition
Name: WINSTON, PATRICIA S.,
Address: 21304 BERKSHIRE AVE
City-St-Zip: PT CHARLOTTE, FL 33954 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA S. WINSTON P 03/27/2008

Electronic Signature of Signing Officer or Director Date