

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 533777

**Entity Name:** OAK HILL INVESTMENTS, INC.

**Current Principal Place of Business:**

% CHARLES D. WINSTON  
21435 SHELDON AVENUE  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

% CHARLES D. WINSTON  
21435 SHELDON AVENUE  
PORT CHARLOTTE, FL 33952

**FEI Number:** 59-1820932

**Certificate of Status Desired:** No

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

WINSTON, CHARLES D.  
21435 SHELDON AVE.  
PT CHARLOTTE, FL 33952 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 PVD  
Name WINSTON, CHARLES D.  
Address 21435 SHELDON AVE  
City-State-Zip: PT CHARLOTTE FL 33952

Title STD  
Name WINSTON, PATRICIA S.  
Address 21435 SHELDON AVE  
City-State-Zip: PT CHARLOTTE FL 33952

Title DIRECTOR  
Name NELSON, LISA LUREE  
Address 1330 PATIO TERRACE  
City-State-Zip: NORTH PORT FL 34286

Title DIRECTOR  
Name WINSTON, JEFFREY DEAN  
Address 1525 FORREST AVE NE  
City-State-Zip: GRAND RAPIDS MI 49505

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA S WINSTON

**SECRETARY**

**02/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date