

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 591368

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: OAK HARBOR, INC.

**Current Principal Place of Business:**

10,000 LAKE LOWERY RD.  
OAK HARBOR  
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

#100 OAK HARBOR  
HAINES CITY, FL 33844 US

**New Mailing Address:**

FEI Number: 59-1924219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDERSON, J GREGG  
100 OAK HARBOR LAKE LOWERY RD  
OAK HARBOR  
HAINES CITY, FL 33844 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ANDERSON, J GREGG  
Address: 100 OAK HARBOR LANE LOWERY RD  
City-St-Zip: HAINES CITY, FL 33844

Title: STD ( ) Delete  
Name: ANDERSON, VERNELL,  
Address: OAK HARBOR LAKE LOWERY  
City-St-Zip: HAINES CITY, FL

Title: D ( ) Delete  
Name: SIRIUS, MARIAH  
Address: 8016 MIDNIGHT PASS RD.  
City-St-Zip: SARASOTA, FL 34242

Title: D ( ) Delete  
Name: ANDERSON, JESSICA L  
Address: 100 OAK HARBOR  
City-St-Zip: HAINES CITY, FL 33844

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: J. GREGG ANDERSON

PD

04/28/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date