

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 650409

1. Entity Name
OAK HILL LAND, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90101 024 ***150.00

Principal Place of Business 1991 AMBASSADOR CT CHIPLEY FL 32428 US	Mailing Address 1991 AMBASSADOR CHIPLEY FL 32428-9015 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2026350**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BELECKAS, WITHOLD
1991 AMBASSADOR CT
CHIPLEY FL 32428**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD <input type="checkbox"/> Delete	BELECKAS, WITHOLD 1991 AMBASSADOR COURT CHIPLEY FL 32428	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D <input type="checkbox"/> Delete	REGISTER, STEPHEN B J 1552 BRICKYARD RD CHIPLEY FL 32428	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
ST <input type="checkbox"/> Delete	BELECKAS, GENEVIEVE 1991 AMBASSADOR CT CHIPLEY FL 32428	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
DV <input type="checkbox"/> Delete	LAPINSKI, ROMAN 1040 W FINGERBEARD RD NO 2ND FLR STATES ISL NY	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
V <input type="checkbox"/> Delete	LABUTIS, VITAS 2001 AMBASSADOR CT CHIPLEY FL 32428	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Withold Beleckas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/21/2000 Daytime Phone #: 850-773-3333

CR2E034 (9/99)