


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 12, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F92525</b>		
1. Entity Name OAKFIELD LANES OF BRANDON, INC.		
Principal Place of Business 1001 OAKFIELD DRIVE BRANDON, FL 33511	Mailing Address 1001 OAKFIELD DRIVE BRANDON, FL 33511	
<b>DO NOT WRITE IN THIS SPACE</b>		



07062004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2230329	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent DYKES, ROBERT L. 103 WATKINS WAY BRANDON, FL 33510	<b>DO NOT WRITE IN THIS SPACE</b>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DYKES, ROBERT L., 103 WATKINS WAY BRANDON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DYKES, ROBERT L. 12504 WEXFORD HILLS RD. RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DYKES, PATRICIA L. 103 WATKINS WAY BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JACOBS, TAMMY L. 13304 LEWIS RAULERSON RD. DOVER, FL 33527
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000165157  
 07/12/04-80001-023 150.00

**DO NOT WRITE IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Robert L. Dykes, Pres. 7.6.04 813 681 4183  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #