

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 15, 2005
Secretary of State**

DOCUMENT# G33299

Entity Name: OAK RIDGE PROPERTIES INC.

Current Principal Place of Business:

13355 WREVHAM CT
WELLINGTON, FL 33414 US

New Principal Place of Business:

991 SE BREAKWATER AVE.
PORT ST. LUCIE, FL 34983 US

Current Mailing Address:

13355 WREVHAM CT
WELLINGTON, FL 33414 US

New Mailing Address:

991 SE BREAKWATER AVE.
PORT ST. LUCIE, FL 34983 US

FEI Number: 59-2299817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAUTHER, ROBERT A
13355 WREVHAM CT
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

LAUTHER, ROBERT A
1339 SE CORAL REEF ST.
PORT ST. LUCIE, FL 34983 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: _____ Date: 09/15/2005
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAUTHER, ROBERT A,
Address: 13355 WREVHAM CT
City-St-Zip: WELLINGTON, FL 33414

Title: DV () Delete
Name: LAUTHER, JOAN E
Address: 13355 WREVHAM CT
City-St-Zip: WEST PALM BEACH, FL 33414

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LAUTHER, ROBERT A,
Address: 1339 SE CORAL REEF ST.
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: DV (X) Change () Addition
Name: LAUTHER, JOAN E
Address: 1339 SE CORAL REEF ST.
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VP/O () Change (X) Addition
Name: MC MILLIN, CHRISTOPHER
Address: 991 SE BREAKWATER AVE.
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VP/C () Change (X) Addition
Name: LAUTHER, MICHAEL
Address: 202 NE SURFSIDE AVE.
City-St-Zip: PORT ST. LUCIE, FL 34983

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: ROBERT S. LAUTHER DP 09/15/2005
Electronic Signature of Signing Officer or Director Date