


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # G56567
 1. Entity Name
OAK CREEK GROVE INC.



Principal Place of Business 2815 HAMMOCK DR PLANT CITY, FL 33567 US	Mailing Address 2815 HAMMOCK DR PLANT CITY, FL 33567 US
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05022005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2336918	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EDWARDS, ROBERT S
 2815 HAMMOCK DR
 PLANT CITY, FL 33567

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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)
 Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EDWARDS, ROBERT S 2815 HAMMOCK DR PLANT CITY, FL 33567
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD EDWARDS, ROBERT S JR 836 N CRYSTAL LAKE DR APT #5 LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 S. Edwards
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/30/05 Daytime Phone #: 813-752-2740