

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J04495

**Entity Name:** OAKVIEW LAKES, INC.

**Current Principal Place of Business:**

%ROGER N WRIGHT  
300 S. WASHINGTON AVE.  
FT. MEADE, FL 33841

**Current Mailing Address:**

%ROGER N WRIGHT  
300 S. WASHINGTON AVE.  
FT. MEADE, FL 33841

**FEI Number:** 59-2669147

**Certificate of Status Desired:** No

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

WRIGHT, ROGER N.  
300 SOUTH WASHINGTON AVE.  
4400 HWY. 98 EAST  
FORT MEADE, FL 33841 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name WRIGHT, ROGER N.  
Address HWY 98 E  
City-State-Zip: FT.MEADE FL

Title DVP  
Name WRIGHT, SUSAN E.  
Address 845 MISSISSIPPI AVENUE  
City-State-Zip: LAKELAND FL

Title DT  
Name WRIGHT, DALE S.  
Address 22245 WEST HIGHWAY 40  
City-State-Zip: DUNNELLON FL

Title DS  
Name WRIGHT, JANET H.  
Address HWY 98 E  
City-State-Zip: FT. MEADE FL

*I hereby 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 all other like empowered.*

**SIGNATURE:** ROGER N. WRIGHT

**PRESIDENT**

**02/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date