


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

000367

**FILED**  
**Feb 23, 1999 8:00 am**  
**Secretary of State**

02-23-1999 90021 040 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # J46101**

1. Corporation Name  
**OAK HILL DEVELOPMENT CORPORATION**



Principal Place of Business 5050 INDUSTRIAL RD. ENWALL NJ 07719 US	Mailing Address P.O. BOX 465 FARMINGDALE NJ 07727 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>12/09/1986</b>	4. FEI Number <b>59-2745861</b>	Applied For Not Applicable
21. <b>5050 Industrial Rd</b>	26. <b>5050 Industrial Rd</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	6. Election Campaign Financing <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	
23. City & State <b>Wall Township, N.J</b>	28. City & State	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
24. Zip <b>07719</b>	25. Country <b>USA</b>			
29. Zip	30. Country			

9. Name and Address of Current Registered Agent

**SHUGHART, JR E JOHN A**  
**604 COURTLAND ST SUITE 320**  
**255 SOUTH ORANGE AVE #1600**  
**ORLANDO FL 32804**

10. Name and Address of New Registered Agent

81 Name <b>Shughart Jr John A. % Mathew's Realty &amp; Development, Inc.</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>255 South Orange Ave</b>
83 <b>Suite 801</b>
84 City <b>Orlando</b>
85 Zip Code <b>FL 32801</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *John A. Shughart Jr* DATE: **1/6/99**

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	<b>HARKRADER, JOHN P., JR.</b>	
STREET ADDRESS	<b>5050 INDUSTRIAL RD.</b>	
CITY-ST-ZIP	<b>ENWALL NJ 07719</b>	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	<b>HARKRADER, LINDA A</b>	
STREET ADDRESS	<b>P O BOX 14 407 PLYMOUTH RD</b>	
CITY-ST-ZIP	<b>GWYNNE VALLEY PA 19437</b>	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	<b>WESTRUM, DEBORAH H</b>	
STREET ADDRESS	<b>6025 JOSHUA RD</b>	
CITY-ST-ZIP	<b>FT WASHINGTON PA 19034</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	<b>Wall Township N.J. 07719</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John P. Harkrader Jr* DATE: **5 Jan 99** 732-938-7277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**John P. Harkrader Jr**

CR2E034 (11/98)