

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 21 PM 2: 36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L60684** (2)

1. Corporation Name  
**OA ASSOCIATES, INC.**

Principal Place of Business <b>% GEORGE T. ELMORE 2350 S. CONGRESS AVE. DELRAY BEACH FL 33445</b>	Mailing Address <b>% GEORGE T. ELMORE 2350 S. CONGRESS AVE. DELRAY BEACH FL 33445</b>
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>03/22/1990</b>	3a. Date of Last Report <b>04/29/1994</b>
4. FEI Number <b>65-0178760</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25.	30.

9. Name and Address of Current Registered Agent

**ELMORE, GEORGE T.  
2350 S. CONGRESS AVENUE  
DELRAY BEACH FL 33445**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	<b>FL</b>
83.	
84. City	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DP</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ELMORE, GEORGE T.</b>	1.2 NAME	
STREET ADDRESS	<b>2350 S. CONGRESS AVE.</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>	1.4 CITY - ST - ZIP	
TITLE	<b>DV</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NUTBROWN, JOHN W.</b>	2.2 NAME	
STREET ADDRESS	<b>2350 S. CONGRESS AVE.</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>	2.4 CITY - ST - ZIP	
TITLE	<b>DV</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHAW, JAMES S.</b>	3.2 NAME	
STREET ADDRESS	<b>2350 S. CONGRESS AVE.</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>	3.4 CITY - ST - ZIP	
TITLE	<b>DST</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GORDON, DOUGLAS G.</b>	4.2 NAME	
STREET ADDRESS	<b>2350 S. CONGRESS AVE.</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>DELRAY BEACH FL</b>	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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; that I am a trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or in the block with an address.

SIGNATURE: \_\_\_\_\_ **PAGE** **4-14-95 (407)-278-0456**