

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000030119

**FILED**  
**Jan 25, 2017**  
**Secretary of State**  
**CC1592651701**

**Entity Name:** OAK HEIGHTS DEVELOPMENT 4, INC.

**Current Principal Place of Business:**

700 OAK HEIGHTS CT  
PT ORANGE, FL 32127

**Current Mailing Address:**

700 OAK HEIGHTS CT  
PT ORANGE, FL 32127

**FEI Number:** 20-2436988

**Certificate of Status Desired:** No

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

NOFTALL, F W  
700 OAK HEIGHTS CT  
PT ORANGE, FL 32127 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           PTM  
Name           NOFTALL, F.W.  
Address        700 OAK HEIGHTS CT  
City-State-Zip: PORT ORANGE FL 32127

Title           SD  
Name           NOFTALL, L.A.  
Address        700 OAK HEIGHTS CT  
City-State-Zip: PORT ORANGE FL 32127

*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:** F.W. NOFTALL

**MANAGING MEMBER**

**01/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date