

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90207 026 ***150.00

DOCUMENT # P39108

1. Entity Name
OAK FINANCIAL CORPORATION

Principal Place of Business

9121 BURNING TREE ROAD
 BETHESDA MD 20817
 US

Mailing Address

9121 BURNING TREE ROAD
 BETHESDA MD 20817
 US

2. Principal Place of Business

165 SUGAR MILL DRIVE

3. Mailing Address

165 SUGAR MILL DRIVE

Suite, Apt. #, etc.

OSPREY FL

Suite, Apt. #, etc.

OSPREY FL

City & State

34229 USA

City & State

34229

Zip

Country

Zip

Country

4. FEI Number **52-1627851**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

RUTTER, GORHAM, JR.
283 N. NORTHLAKE BLVD.
STE. 111
ALTAMONTE SPRINGS FL 32701

7. Name and Address of New Registered Agent

Name **RICHARD VAN BLERKOM**
 Street Address (P.O. Box Number is Not Acceptable)
165 SUGAR MILL DRIVE
 City **OSPREY** FL Zip Code **34229**

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.

SIGNATURE *Richard Van Blerkom*, **RICHARD VAN BLERKOM** 1/22/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD VAN BLERKOM, RICHARD 9121 BURNING TREE ROAD BETHESDA MD 20817	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD VAN BLERKOM, RICHARD 165 SUGAR MILL DRIVE OSPREY, FL 34229	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Van Blerkom* **RICHARD VAN BLERKOM** 1/17/01 941-918-2500
Signature and typed or printed name of signing officer or director Date Daytime Phone #