## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000108950

Entity Name: OAKDALE WYLIE CORPORATION

FILED Mar 05, 2009 Secretary of State

| ,   |   |   |   |  |                             |          |  |
|---|---|---|---|--|-----------------------------|----------|--|
| Current Principal Place of Business:              |   |   | New Prince                                  | New Principal Place of Business:             |                             |          |  |
|   | I CIRCLE NOF<br>RSBURG, FL  |   |   |  |                             |          |  |
| Current Mailing Address:                          |   |   | New Maili                                   | New Mailing Address:                         |                             |          |  |
|   | HCIRCLE NOF<br>RSBURG, FL   |   |   |  |                             |          |  |
| FEI Number: 59-3484896 FEI Number Applied For ( ) |   | FEI Number Not App  | licable ( )                                 | Certificate of Status Desired ( )            |                             |          |  |
| Name and  | Address of (  | Current Registered Agent                                  | :: Name and                                 | Name and Address of New Registered Agent:    |                             |          |  |
| 2152 14TH<br>ST. PETER<br>The above               | R, CLARK H III<br>H CIRCLE NOF<br>RSBURG, FL<br>Hammed entity<br>He of Florida. | RTH   | he purpose of changing                      | ts registered                                | office or registered agent, | or both, |  |
| SIGNATU   |   |   |   |  |                             |          |  |
|   | Electro   | nic Signature of Registered g Trust Fund Contribution (). | Agent                                       |  | Date                        |          |  |
| OFFICERS AND DIRECTORS:                           |   |   | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |                             |          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | SCHERER, CL<br>2152 14TH CIF  |   | Title:<br>Name:<br>Address:<br>City-St-Zip: | (  | ( ) Change ( ) Addition     |          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | SERTICH, LAR  | STREET, SUITE 500   | Title:<br>Name:<br>Address:<br>City-St-Zip: | SERTICH, LA                                  | L STREET, SUITE 500         |          |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CLARK H. SCHERER, III D 03/05/2009