

**2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000083407

**FILED  
Oct 18, 2004  
Secretary of State**

**Entity Name:** OAKWOOD APARTMENTS, INC.

**Current Principal Place of Business:**

205 TYRES ALLEY  
BRONSON, FL 32621

**New Principal Place of Business:**

**Current Mailing Address:**

9651 N.E. 110TH AVENUE  
ARCHER, FL 32618

**New Mailing Address:**

**FEI Number:** 59-3531288

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** (X)

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

SMITH, KAREN  
205 TYRES ALLEY  
BRONSON, FL 32621 US

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

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

**Election Campaign Financing Trust Fund Contribution** ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SMITH, STEVE  
Address: 9651 NE 110TH AVE  
City-St-Zip: ARCHER, FL 32618

Title: VPD ( ) Delete  
Name: SMITH, KAREN  
Address: 9651 NE 110TH AVE  
City-St-Zip: ARCHER, FL 32618

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN C. SMITH

VPD

10/18/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date