


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000003743
 1. Entity Name
 OAK RIDGE INVESTMENT ASSOCIATES, LLC



Principal Place of Business Mailing Address
 155 SOUTH MIAMI AVENUE, PH IIA 155 SOUTH MIAMI AVENUE, PH IIA
 MIAMI, FL 33130 MIAMI, FL 33130



DO NOT WRITE IN THIS SPACE

04202005No Chg-LLC CR2E083 (10/03)

4. FEI Number Applied For
 65-1110152 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 SIRLIN, DANIEL
 155 SOUTH MIAMI AVENUE, PH IIA
 MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  Daniel Sirlin 4/29/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2005


9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PANTHER OAKRIDGE, INC.
STREET ADDRESS	155 S MIAMI AVE P#IIA
CITY - ST - ZIP	MIAMI, FL 33130
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

100000344101
 04/29/05-80123-012 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  Daniel Sirlin 4/29/05 305-374-5952
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #