

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052949

FILED
Feb 27, 2009
Secretary of State

Entity Name: SEAN & NOELLE OAKMAN LLC

Current Principal Place of Business:

5610 HAWKLAKE RD
LITHIA, FL 335475801 US

New Principal Place of Business:

Current Mailing Address:

5610 HAWKLAKE RD
LITHIA, FL 335475801 US

New Mailing Address:

FEI Number: 20-0822488 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)

Name and Address of Current Registered Agent:

OAKMAN, SEAN A
5610 HAWKLAKE ROAD
LITHIA, FL 335475801 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OAKMAN, SEAN A
Address: 5610 HAWKLAKE ROAD
City-St-Zip: LITHIA, FL 335475801 US

Title: MGR () Delete
Name: OAKMAN, NOELLE M
Address: 5610 HAWKLAKE ROAD
City-St-Zip: LITHIA, FL 335475801 US

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: SEAN OAKMAN

MGR

02/27/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date