

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079305

FILED
Apr 23, 2010
Secretary of State

Entity Name: SHADOW OAKS OF OCALA, LLC

Current Principal Place of Business:

3120 SE 10TH AVE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

3120 SE 10TH AVE
OCALA, FL 34471

New Mailing Address:

FEI Number: 13-4288484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSON, CAROL A
3120 SE 10TH AVE
OCALA, FL 34471 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: MGRM
Name: JOHNSON, CAROL A
Address: 3120 SE 10TH AVE
City-St-Zip: OCALA, FL 34471

Title: MGRM
Name: JOHNSON, JAMES N
Address: 3120 SE 10TH AVE
City-St-Zip: OCALA, FL 34471

Title: MGRM
Name: WONSIK, CONNIE C
Address: 3120 SE 10TH AVE
City-St-Zip: OCALA, FL 34471

Title: MGRM
Name: WONSIK, JOHN D
Address: 3120 SE 10TH AVE
City-St-Zip: OCALA, FL 34471

I hereby 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: CAROL A. JOHNSON

MEMB

04/23/2010

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