

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037266

Entity Name: SHADY OAKS, LLC

FILED
Mar 16, 2006
Secretary of State

Current Principal Place of Business:

C/O ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

C/O ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 20-4491682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLIFFORD I. HERTZ, P.A.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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: MYERS, STEPHEN E JR.
Address: 249 ROYAL PALM WAY, SUITE 301
City-St-Zip: PALM BEACH, FL 33480 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MYERS, STEPHEN E SR.
Address: C/O ONE NO. CLEMATIS STREET, SUITE 500
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGR () Change (X) Addition
Name: TOMEU, ENRIQUE A
Address: C/O ONE NO. CLEMATIS STREET, SUITE 500
City-St-Zip: WEST PALM BEACH, FL 33401 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CLIFFORD I. HERTZ, ESQ., AUTHORIZED REP.

AR

03/16/2006

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