

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064719

FILED  
Apr 12, 2009  
Secretary of State

Entity Name: SEVEN OAK TREES INVESTMENTS, LLC

**Current Principal Place of Business:**

8736 NW 136TH AVENUE ROAD  
OCALA, FL 34482

**New Principal Place of Business:**

**Current Mailing Address:**

8736 NW 136TH AVENUE ROAD  
OCALA, FL 34482

**New Mailing Address:**

FEI Number: 20-5108899

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHENKER, LANCE  
8736 NW 136TH AVENUE ROAD  
OCALA, FL 34482 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: SEVEN OAKS INVESTMENTS, INC.  
Address: 8736 NW 136TH AVENUE ROAD  
City-St-Zip: Ocala, FL 34482

Title: MGR ( ) Delete  
Name: PRASHAD, RAKESH  
Address: 5015 SE 7TH AVENUE  
City-St-Zip: Ocala, FL 34480

Title: MGR ( ) Delete  
Name: PRASHAD, SEEMA  
Address: 5015 SE 7TH AVENUE  
City-St-Zip: Ocala, FL 34480

**ADDITIONS/CHANGES:**

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

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: LANCE SCHENKER

RA

04/12/2009

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