

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002327

Entity Name: 4 POINT OF OCALA, LLC

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

2631 SE 58TH AVE.
OCALA, FL 34480

New Principal Place of Business:

Current Mailing Address:

2631 SE 58TH AVE
OCALA, FL 34480

New Mailing Address:

FEI Number: 26-1696133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FABIAN, MATTHEW P
1850 SE 18TH AVE
2501
OCALA, FL FL US

Name and Address of New Registered Agent:

FABIAN, MATTHEW P
4777 SE 25TH LOOP
OCALA, FL 34480 US

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: _____

01/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FABIAN, MATTHEW P
Address: 1850 SE 18TH AVE #2501
City-St-Zip: OCALA, FL 34471

Title: MGRM (X) Delete
Name: FABIAN, JOHN E JR
Address: 2931 SE 49TH AVE
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FABIAN, MATTHEW P
Address: 4777 SE 25TH LOOP
City-St-Zip: OCALA, FL 34480

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: MATTHEW P FABIAN

MGRM

01/16/2009

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