

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094062

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: OAK RUN FAMILY COMMUNITIES LLC

**Current Principal Place of Business:**

8413 LAUREL FAIR CIR STE #100  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

8413 LAUREL FAIR CIR STE #100  
TAMPA, FL 33610

**New Mailing Address:**

PO BOX 22053  
TAMPA, FL 33622

FEI Number: 22-3943270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAUGHEY, R.J. II  
401 E. JACKSON STREET, SUITE 2225  
TAMPA, FL 33602 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: MGRS ( ) Delete  
Name: PEARSON, GLENN  
Address: 8413 LAUREL FAIR CIR STE #100  
City-St-Zip: TAMPA, FL 33610

Title: T ( ) Delete  
Name: PEARSON, GLENN  
Address: 8413 LAUREL FAIR CIR STE #100  
City-St-Zip: TAMPA, FL 33610

**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: GLENN PEARSON

MGRM

01/11/2008

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