

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032418

Entity Name: OARE ASSOCIATES, LLC

Current Principal Place of Business:

203 E RICH AVENUE
DELAND, FL 32724

Current Mailing Address:

203 E RICH AVENUE
DELAND, FL 32724 US

FEI Number: 82-0575690

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, JANET E. ESQ.
SHUFFIELD, LOWMAN, & WILSON, P.A.
203 EAST RICH AVENUE
DELAND, FL 32724 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: JANET E. MARTINEZ

01/22/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|--|
| Title | MGR |
| Name | NEALE, ELIZABETH O |
| Address | 9006 DAYFLOWER STREET |
| City-State-Zip: | PROSPECT KY 40059 |
| Title | MGR |
| Name | BROCKENBROUGH, AUSTIN IV |
| Address | LOWE, BROCKENBROUGH & CO. 1802 BAYBERRY COURT SUITE 400 |
| City-State-Zip: | RICHMOND VA 23226 |

| | |
|-----------------|-----------------------|
| Title | MGR |
| Name | OARE, ROBERT L III |
| Address | 13621 NW 112TH AVENUE |
| City-State-Zip: | ALACHUA FL 32615 |

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH O. NEALE

MANAGER

01/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date