

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000016319

**Entity Name:** OAKLEY SAVANNAH, LLC

**Current Principal Place of Business:**

101 ABC ROAD  
LAKE WALES, FL 33859

**Current Mailing Address:**

101 ABC ROAD  
LAKE WALES, FL 33859 US

**FEI Number:** 58-2468112

**Certificate of Status Desired:** No

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

OAKLEY, THOMAS E  
101 ABC ROAD  
LAKE WALES, FL 33859 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

|                 |                     |                 |                           |
|-----------------|---------------------|-----------------|---------------------------|
| Title           | MGR                 | Title           | AUTHORIZED REPRESENTATIVE |
| Name            | OAKLEY, THOMAS E    | Name            | SHERMAN, TYSON            |
| Address         | 101 ABC ROAD        | Address         | 101 ABC ROAD              |
| City-State-Zip: | LAKE WALES FL 33859 | City-State-Zip: | LAKE WALES FL 33859       |

|                 |                           |
|-----------------|---------------------------|
| Title           | AUTHORIZED REPRESENTATIVE |
| Name            | JAMES, JOHNNIE            |
| Address         | 101 ABC ROAD              |
| City-State-Zip: | LAKE WALES FL 33859       |

*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:** TYSON SHERMAN

**CFO**

**03/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date