### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000080459

Entity Name: OAKRIDGE FOREST PARTNERS LLC

## **Current Principal Place of Business:**

161 HAMPTON POINT DRIVE SUITE 1 ST AUGUSTINE, FL 32092

# **Current Mailing Address:**

161 HAMPTON POINT DRIVE SUITE 1 ST AUGUSTINE, FL 32092

# FEI Number: APPLIED FOR

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

WARD, CHRISTOPHER 161 HAMPTON POINT DRIVE SUITE 1 ST AUGUSTINE, FL 32092 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

#### Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	NACANA ADVISORS, LLC	Name	TOWERS, LAWRENCE R
Address 12620-3 BEACH BLVD PMB #174 City-State-Zip: JACKSONVILLE FL 3224		Address	161 HAMPTON POINT DRIVE STE 1
	JACKSONVILLE FL 32246	City-State-Zip:	ST AUGUSTINE FL 32092

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: CHRISTOPHER WARD

MGR

02/05/2022

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 05, 2022 Secretary of State 6727136225CC

Certificate of Status Desired: No