

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1100006206

**Entity Name:** NORTH OAK PARTNERS, LLC

**Current Principal Place of Business:**

5702 DOVER DRIVE  
LISLE, IL 60532

**FILED**  
**Apr 02, 2013**  
**Secretary of State**  
**CC7407409359**

**Current Mailing Address:**

5702 DOVER DRIVE  
LISLE, IL 60532

**FEI Number: 26-4703897**

**Certificate of Status Desired: Yes**

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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	MGRM	Title	MGRM
Name	DUBAN, JOHN	Name	DUBAN, MARK-EUGENE
Address	5702 DOVER DRIVE	Address	3299 STRATFORD COURT NO, 3C
City-State-Zip:	LISLE IL 60532	City-State-Zip:	LAKE BLUFF IL 60444
Title	MGRM	Title	MGRM
Name	SHAKOOR, CHRISTINA H	Name	DUBAN, JAMES
Address	10206 CHARTER RIDGE STREET	Address	204 E MAIN ST, PO BOX 704
City-State-Zip:	SAN ANTONIO TX 78230	City-State-Zip:	ROCHESTER IL 62563
Title	MGRM		
Name	DUBAN, MATTHEW E		
Address	14705 MONDOUBLEAU LANE		
City-State-Zip:	FLORISSANT MO 63034		

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JAMES P.E. DUBAN**

**NORTH OAK PARTNERS, 04/02/2013  
LLC**

Electronic Signature of Signing Authorized Person(s) Detail

Date