2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000002129

1. Entity Name
OAK FIDELITY TRUST, LLC

Principal Place of Business	Mailing Address
2328 TENTH AVENUE NORTH, SUITE 403 LAKE WORTH, FL 33461-6606	2328 TENTH AVENUE NORTH, SUITE 403 LAKE WORTH, FL 33461-6606

DO NOT WRITE IN THIS SPACE

01232008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
65-0990436
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

RUKIN, ROGER
2328 TENTH AVENUE NORTH, SUITE 403
LAKE WORTH, FL 33461-6606

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000809838
02/08/08-80038-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JAMES B RUKIN REVOCABLE TRUST
STREET ADDRESS	2328 10TH AVE. NORTH, SUITE 403
CITY-ST-ZIP	LAKE WORTH, FL 334616606
TITLE	MGRM
NAME	JULIA R. RUKIN REVOCABLE TRUST
STREET ADDRESS	2328 10TH AVE. NORTH SUITE 403
CITY-ST-ZIP	LAKE WORTH, FL 334616606
TITLE	MGR
NAME	RUKIN, ROGER B
STREET ADDRESS	2328 10TH AVE NO. STE 403
CITY-ST-ZIP	LAKE WORTH, FL 33461
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ ROGER B. RUKIN 1-28-08 561586-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #