

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010701

Entity Name: DEAD OAK, LLC

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

1414 SWANN AVENUE, SUITE 201  
TAMPA, FL 336062533

## New Principal Place of Business:

1414 SWANN AVENUE,  
201  
TAMPA, FL 336062533

## Current Mailing Address:

1414 SWANN AVENUE, SUITE 201  
TAMPA, FL 336062533

## New Mailing Address:

1414 SWANN AVENUE,  
201  
TAMPA, FL 336062533

FEI Number: 59-3669752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLANCHARD, WILLIAM M  
1414 SWANN AVENUE, SUITE 201  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

BLANCHARD, WILLIAM M  
1414 SWANN AVENUE,  
201  
TAMPA, FL 33606 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:

04/29/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: BLANCHARD, WILLIAM M  
Address: 1414 SWANN AVE., SUITE 201  
City-St-Zip: TAMPA, FL 33606

Title: MGRM ( ) Delete  
Name: BLANCHARD, G. ROBERT JR.  
Address: 1414 SWANN AVE., SUITE 201  
City-St-Zip: TAMPA, FL 33606 25

Title: MGR ( ) Delete  
Name: HARRIS, MALCOLM  
Address: 14 SWANN AVE., SUITE 201  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: WILLIAM BLANCHARD

MGRM

04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date