

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013418

Entity Name: LIVE OAK III, LLC

FILED  
Apr 03, 2006  
Secretary of State

**Current Principal Place of Business:**

7305 N. W. 294TH TERRACE  
HIGH SPRINGS, FL 32643

**New Principal Place of Business:**

**Current Mailing Address:**

1827 ASBURY AVE.  
EVANSTON, IL 60201

**New Mailing Address:**

FEI Number: 54-2074170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR, JAMES J JR.  
420 SOUTH LAWRENCE BOULEVARD  
KEYSTONE HEIGHTS, FL 32656 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BARNS, GARY  
Address: 612 NORTH ELM ST.  
City-St-Zip: HINSDALE, IL 60521

Title: MGRM ( ) Delete  
Name: STANZ, JOHN  
Address: 8857 SOUTH DUNNS FARM ROAD  
City-St-Zip: MAPLE CITY, MI 49664

Title: MGRM ( ) Delete  
Name: WIESEN, JIM  
Address: 1827 ASBURY AVE.  
City-St-Zip: EVANSTON, IL 60201

Title: MGRM ( ) Delete  
Name: WIESEN, MIKE  
Address: 7305 NW 294TH TERRACE  
City-St-Zip: HIGH SPRINGS, FL 32643

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BURNS, GARY  
Address: 612 NORTH ELM ST.  
City-St-Zip: HINSDALE, IL 60521

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 Chapter 119, 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: JIM WIESEN

MGRM

04/03/2006

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