


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 18, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000023206 1. Entity Name LIVE OAK INVESTMENTS, LLC	
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Principal Place of Business 1750 W BROADWAY SUITE 118 WEST PALM BEACH, FL 32765	Mailing Address 1750 W BROADWAY SUITE 118 WEST PALM BEACH, FL 32765
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08122004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3414485	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent JERMAN, RICHARD A 1750 W BROADWAY SUITE 118 WEST PALM BEACH, FL 33401
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**DO NOT WRITE
IN THIS SPACE**

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

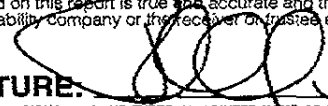
**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JERMAN, RICHARD A 1750 W BROADWAY SUITE 118 WEST PALM BEACH, FL 33401
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08/18/04-80002-019 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 803, Florida Statutes.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE
Date: **8/18/04** Daytime Phone #: **407-971-1010**