

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000005022

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Entity Name:** LIVE OAK IV, LLC

**Current Principal Place of Business:**

12623 NE 199TH STREET  
WALDO, FL 32694

**New Principal Place of Business:**

**Current Mailing Address:**

1827 ASBURY AVE.  
EVANSTON, IL 60201

**New Mailing Address:**

**FEI Number:** 51-0451905

**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 BLVD  
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  
**Name:** WIESEN, MIKE  
**Address:** 12623 NE 199TH STREET  
**City-St-Zip:** WALDO, FL 32694

**Title:** MGRM  
**Name:** BURNS, GARY  
**Address:** 612 NORTH ELM ST.  
**City-St-Zip:** HINDALE, IL 60521

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

**Title:** MGRM  
**Name:** WIESEN, JAMES  
**Address:** 1827 ASBURY AVE.  
**City-St-Zip:** EVANSTON, IL 60201

I hereby 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:** JAMES J. WIESEN

MGRM

01/27/2010

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