2007 LIMITED LIABILITY COMPANY ANNUAL-REPORT (AR)

FILED Feb 02, 2007 08:00 AM DOCUMENT # L03000039214 1. Entity Namo **Secretary of State** WHITE OAK RIDGE, LLC Principal Place of Business Mailing Address 14361 RIVERROCK COURT CARMEL IN 46033 14361 RIVERROCK COURT CARMEL IN 46033 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito Apt #, etc Suite, Apt. #, atc 1st MOORE CR2E083 (10/06) City & State City & State Applied For 4. FEI Number 20-0303390 Not Applicable Zip Country מו7 Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPAHN, DAVID H JR Street Address (P.O. Box Number is Not Acceptable) 6654 WINDJAMMER PLACE **BRADENTON FL 34202** 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. (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 U000000619104 Make Check Payable to Florida Department of State 02/08/07-80057-010 50.00 Due By May 1, 2007 9, MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. mur MGRM ☐ Delete ☐ Change Addition NAME SPAHN, DAVID JR STREET ADDRESS 14361 RIVERROCK COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CARMEL IN 46033 FITTE ☐ Delete TITLE ☐ Chance ■ Addilion NAME SPAHN, DEBRA STREET ADDRESS STREET ADDRESS 14361 RIVERROCK COURT CITY-ST-ZIP CITY-S1-ZIP CARMEL IN 46033 Delete IIILE Change Addition NAME NAME PIANO, ANTHONY C TRUSTEE STREET ADDRESS STREET ADDRESS 6654 WINDJAMMER PLACE CITY+SI-7IP BRADENTON FL 34202 CITY+ST-ZIP FITTE ☐ Delete TITLE □ Change Addition NAME PIANO, SANDRA J TRUSTEE NAME STREET ADDRESS STREET ADDRESS 6654 WINDJAMMER PLACE CHY-SI-ZIP CITY-ST-ZIP **BRADENTON FL 34202** ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CUY-SI-ZIP CITY-S1-ZIP DHE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CUTY-ST-ZIP CITY-ST-ZIP

SIGNATURE: David H. Spahn J. David H. SPAHN JR. 1/30/07 317-595-8540

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath; 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.