

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012948

FILED
Feb 07, 2009
Secretary of State

Entity Name: BOB OXNARD LC

Current Principal Place of Business:

1346 CHALON LANE
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

1346 CHALON LANE
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 20-0742888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OXNARD, ROBERT T
1346 CHALON LANE
FT. MYERS, FL 33919 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: MGR () Delete
Name: OXNARD, ROBERT T
Address: 1346 CHALON LANE
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM () Delete
Name: LETOURNEAU, JENNIFER
Address: 4334 HARBOUR LANE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: MGRM () Delete
Name: OXNARD, FRANCES B
Address: 1346 CHALON LANE
City-St-Zip: FT. MYERS, FL 33919

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LETOURNEAU, JENNIFER
Address: 5334 DEL MONTE CT.
City-St-Zip: CAPE CORAL, FL 33904

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT T. OXNARD

MGR

02/07/2009

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