2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L04000047563

Entity Name: OCV, LLC

Current Principal Place of Business:

914 ATLANTIC AVE
STE 2-F
FERNANDINA BEACH, FL 32024

New Principal Place of Business:

914 ATLANTIC AVE
STE 2-F
FERNANDINA BEACH, FL 32034

Current Mailing Address:

914 ATLANTIC AVE
STE 2-F
FERNANDINA BEACH, FL 32024

New Mailing Address:

914 ATLANTIC AVE
STE 2-F
FERNANDINA BEACH, FL 32034

FEI Number: 20-1051578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEADBEATER, JOHN T
227 SOUTH CALHOUN STREET
TALLAHASSEE, FL 323011805 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: PHELON, RUSSELL D
Address: 914 ATLANTIC AVE
City-St-Zip: LAKE CITY, FL 32024

Title: MGR ( ) Delete
Name: GIBSON, JOHN F III
Address: 914 ATLANTIC AVE
City-St-Zip: FERNANDINA BEACH, FL 32024

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PHELON, RUSSELL D
Address: 914 ATLANTIC AVE STE 2-F
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGR (X) Change ( ) Addition
Name: SAPP, KATHY H
Address: 914 ATLANTIC AVE STE 2-F
City-St-Zip: FERNANDINA BEACH, FL 32034

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: KATHY H. SAPP MGR 04/24/2007

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