

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 23, 2005 8:00 am**  
**Secretary of State**

03-23-2005 90238 025 \*\*\*\*50.00

<b>DOCUMENT # L04000049137</b>					
<b>1. Entity Name</b> OAKBROOK DEVELOPMENT, LLC					
<b>Principal Place of Business</b> 12412 SAN JOSE BLVD. SUITE 202 JACKSONVILLE, FL 32223			<b>Mailing Address</b> 12412 SAN JOSE BLVD. SUITE 202 JACKSONVILLE, FL 32223		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		03172005    Chg-LLC    CR2E083 (10/03)	
<b>4. FEI Number</b> 11-3725137				Applied For Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  SHEFFIELD, J. HOWARD ESQ. 4209 BAYMEADOWS ROAD SUITE 4 SHEFFIELD & BOATRIGHT, P.A. JACKSONVILLE, FL 32217			<b>7. Name and Address of New Registered Agent</b>  Name Street Address (P.O. Box Number is Not Acceptable) 6101 GAZEBO PARK PLACE STE 101 City    JACKSONVILLE    FL    Zip Code    32257		
<b>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.</b>  SIGNATURE <i>J. Howard Sheffield</i> DATE    3-21-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS / MANAGERS</b>			<b>10. ADDITIONS / CHANGES</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WARE, DONALD S JR. 12412 SAN JOSE BLVD. JACKSONVILLE, FL 32223 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 608, Florida Statutes.</b>					
<b>SIGNATURE:</b> <i>Donald S. Ware Jr.</i> <b>DONALD S. WARE JR</b> 3-21-05    904-425-3344			Date    Daytime Phone #		