

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078487

FILED  
Mar 31, 2008  
Secretary of State

Entity Name: ROYAL OAK CENTER, L.L.C.

## Current Principal Place of Business:

303 NE 3RD AVE.  
CAPE CORAL, FL 33909

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 152463  
CAPE CORAL, FL 33915

## New Mailing Address:

P.O. BOX 3830  
NORTH FORT MYERS, FL 33918

FEI Number: 11-3731977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ROEDER, RON  
1222 S.W. 54TH STREET  
CAPE CORAL, FL 33914 US

## Name and Address of New Registered Agent:

MAYMON, CHERYL A  
1888-A NORTH TAMIAMI TRAIL  
NORTH FORT MYERS, FL 33903 US

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: CHERYL A. MAYMON

03/31/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ROEDER, RON  
Address: 1222 SW 54TH STREET  
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR ( ) Delete  
Name: ZINK, LAWRENCE F  
Address: 84 WILDFLOWER TRAIL  
City-St-Zip: MOUNTAIN HOME, AR 72653

Title: MGR ( ) Delete  
Name: ROEDER, CAROL L  
Address: 1222 SW 54TH STREET  
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR ( ) Delete  
Name: ZINK, DONNA K  
Address: 84 WILDFLOWER TRAIL  
City-St-Zip: MOUNTAIN HOME, AR 72653

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ROEDER, RON  
Address: 1585 CAPADARO CT.  
City-St-Zip: MONUMENT, CO 80132

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

Title: MGR (X) Change ( ) Addition  
Name: ROEDER, CAROL L  
Address: 1585 CAPADARO CT.  
City-St-Zip: MOUNMENT, CO 80132

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: DONNA K ZINK

MGR

03/31/2008

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