2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000089206

1. Entity Name

OAK HEIGHTS DEVELOPMENT 1, LLC



Principal Place of Business 700 OAK HEIGHTS COURT PORT ORANGE, FL 32127 Mailing Address

700 OAK HEIGHTS COURT PORT ORANGE, FL 32127

FILED Feb 27, 2008 08:00 Al Secretary of State

Daytime Phone #



DO NOT WRITE IN THIS SPACE

02222008No Chg-LLC CR2E083 (12/07)

4. FEI Number	-	i "	Applied For
20-2000317			Not Applicable
5. Certificate of Status Desired		\$5.00	Additional

6. Name and Address of Current Registered Agent

NOFTALL, F.W. 700 OAK HEIGHTS COURT PORT ORANGE, FL 32127

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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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.							
SIGNATURE_		(NOTE, Registered Agent signature required when reinstating)		DATE			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75							
9	. MANAGING MEMBERS/MANAGERS			0			
NAMÉ SIREET ADDRESS CITY-SI-ZIP	MGRM NOFTALL, F.W. 700 OAK HEIGHTS COURT PORT ORANGE, FL 32127	`					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000841465 03/10/08-80019-007 138.75			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE