

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091934

Entity Name: WILLOWOAK DEVELOPMENT, LLC

FILED  
Apr 13, 2005  
Secretary of State

**Current Principal Place of Business:**

8100 NW 15 PLACE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

8100 NW 15 PLACE  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 20-2664254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KEMPTON, JEFF  
8100 NW 15 PLACE  
GAINESVILLE, FL 32606 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HUDSON, JAMES  
Address: 15471 NW 46TH LANE  
City-St-Zip: CHIEFLAND, FL 62626

Title: MGRM ( ) Delete  
Name: HUDSON, BRUCE  
Address: 11801 SW 3 AVE.  
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM ( ) Delete  
Name: KEMPTON, JEFF  
Address: 8100 NW 15 PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: MGRM ( ) Delete  
Name: COLEMAN, KEVIN  
Address: PO BOX 718  
City-St-Zip: NEWBERRY, FL 32669

**ADDITIONS/CHANGES:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHARI KEMPTON

MANG

04/13/2005

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