


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 08, 2007 08:00 A
Secretary of State

DOCUMENT # L05000006440 1. Entity Name RIVER OAK GROVE, LLC	
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Principal Place of Business 13176 SW 144TH PARKWAY OKEECHOBEE, FL 34974	Mailing Address 13176 SW 144TH PARKWAY OKEECHOBEE, FL 34974
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DO NOT WRITE IN THIS SPACE



02042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3795487	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

DEHAYS, KAREN
13176 SW 144TH PARKWAY
OKEECHOBEE, FL 34974

**DO NOT WRITE
IN THIS SPACE**

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 reappointing) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000628008
02/15/07-80083-023 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEHAYS, STEVEN W 13176 SW 144TH PARKWAY OKEECHOBEE, FL 34974
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEHAYS, KAREN 13176 SW 144TH PARKWAY OKEECHOBEE, FL 34974
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IN THIS SPACE**

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: *Karen Dehays* 2/5/2007 (863) 467-8889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #