2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023581

Entity Name: MASSIVE OAKS, L.L.C.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3733 W. UNIVERSITY BOULEVARD 3733 W. UNIVERSITY BOULEVARD W

STE 115 A STE 115 A

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217

Current Mailing Address: New Mailing Address:

3733 W. UNIVERSITY BOULEVARD 3733 W. UNIVERSITY BOULEVARD W

STE 115 A STE 115 A

JACKSONVILLE, FL 32217 STE 12217

STE 115 A

JACKSONVILLE, FL 32217

,

FEI Number: 20-2705664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ANSBACHER & SCHNEIDER, P.A.

5150 BELFORT ROAD, BUILDING 100

JACKSONVILLE, FL 32256 US

HELMING, DONNA MGR
3733 UNIVERSITY BLVD W STE115-A
JACKSONVILLE, FL 32217 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: DONNA HELMING 04/27/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MASSIVE OAKS, L.L.C.
 Name:

 Address:
 3733 W. UNIVERSITY BOULEVARD, SUITE 115-A
 Address:

Address: 3733 W. UNIVERSITY BOULEVARD, SUITE 115-A Address: City-St-Zip: JACKSONVILLE, FL 32217 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 HELMING MGR 04/27/2009