

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035563

FILED  
Mar 29, 2009  
Secretary of State

Entity Name: OK LAKE FLAGLER PARTNERS, L.L.C.

**Current Principal Place of Business:**

17 WHITEHALL COURT  
FLAGLER BEACH, FL 32316

**New Principal Place of Business:**

**Current Mailing Address:**

17 WHITEHALL COURT  
FLAGLER BEACH, FL 32316

**New Mailing Address:**

FEI Number: 38-3722945

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLLINS, C. LLOYD  
17 WHITEHALL COURT  
FLAGLER BEACH, FL 32316 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COLLINS, C. LLOYD  
Address: 17 WHITEHALL COURT  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM ( ) Delete  
Name: O'KELLEY, M. BENSON JR.  
Address: 2017 NORTH DAYTONA AVE.  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

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

Title: MGRM ( ) Change (X) Addition  
Name: O'KELLEY, JOHN D  
Address: 611 LAKESHORE DR.  
City-St-Zip: LEESBURG, FL 34748

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: C. LLOYD COLLINS

MGRM

03/29/2009

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