

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059339

FILED  
Jan 06, 2010  
Secretary of State

Entity Name: OCALA EVANS, LLC

**Current Principal Place of Business:**

8320 WEST SUNRISE BLVD., SUITE 203  
PLANTATION, FL 333225432

**New Principal Place of Business:**

**Current Mailing Address:**

8320 WEST SUNRISE BLVD., SUITE 203  
PLANTATION, FL 333225432

**New Mailing Address:**

FEI Number: 20-3093964

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOLSTEIN, GERALD K  
8320 WEST SUNRISE BLVD., SUITE 203  
PLANTATION, FL 333225432 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: MGR  
Name: HOLSTEIN, GERALD K  
Address: 8320 WEST SUNRISE BLVD., SUITE 203  
City-St-Zip: PLANTATION, FL 333225432 US

Title: MGR  
Name: HOLDEN, PETER  
Address: 8320 WEST SUNRISE BLVD., SUITE 203  
City-St-Zip: PLANTATION, FL 333225432 US

I hereby 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: GERALD K. HOLSTEIN

MGR

01/06/2010

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