2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# L05000067705

Entity Name: RIVER OAK INVESTORS, LLC

Current Principal Place of Business:

1301 RIVERPLACE BLVD.
SUITE 1500
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1301 RIVERPLACE BLVD.
SUITE 1500
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 20-3124540 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHRITTON, J. KIRBY
1301 RIVERPLACE BLVD.
SUITE 1500
JACKSONVILLE, FL 32207 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:	M	( ) Delete
Name:	ANDERSON, ANTHONY A	
Address:	3455 CHRYSLER DRIVE	
City-St-Zip:	JACKSONVILLE, FL 32257 US	
Title:	M	( ) Delete
Name:	CHRITTON, J. KIRBY	
Address:	913 SARATOGA DRIVE	
City-St-Zip:	JACKSONVILLE, FL 32207 US	
Title:	M	( ) Delete
Name:	COX, BETSY C	
Address:	1162 MAPLETON ROAD	
City-St-Zip:	JACKSONVILLE, FL 32207 US	
Title:	M	( ) Delete
Name:	HIEB, E. ALLEN JR.	
Address:	4723 ALGONQUIN AVENUE	
City-St-Zip:	JACKSONVILLE, FL 32210 US	
Title:	M	( ) Delete
Name:	IBACH, JOHN R	
Address:	1335 GREENRIDGE ROAD	
City-St-Zip:	JACKSONVILLE, FL 32207 US	
Title:	M	( ) Delete
Name:	WEINSTEIN, IRVIN M	
Address:	933 POINT LA VISTA ROAD NORTH	
City-St-Zip:	JACKSONVILLE, FL 32207 US	

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:	
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 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: ANTHONY A. ANDERSON M 04/22/2008

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