2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071078

Address:

City-St-Zip:

14035 WEST RIVER ROAD

INGLIS, FL 34449 US

Entity Name: BIG OAKS RIVER RESORT, LLC

FILED May 16, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
14035 WE INGLIS, FI	ST RIVER ROAD _ 34449	
Current N	lailing Address:	New Mailing Address:
14035 WE INGLIS, FL	ST RIVER ROAD _ 34449	
In accordan	ce with s. 607.193(2)(b), F.S., the limited liability	
Name and	l Address of Current Registered Agent	Name and Address of New Registered Agent:
7805 S.W. C/O FRAN	H, STEVEN ESQ. 6TH COURT IK, WEINBERG & BLACK, P.L. ION, FL 33324 US	R ROAD ddress: R ROAD READ READ
	e named entity submits this statement for t e of Florida.	ne purpose of changing its registered office or registered agent, or bot
SIGNATUI	RE:	
	Electronic Signature of Registered	Agent Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:
Title: Name: Address: City-St-Zip:	MGR () Delete ASTROVE, ANDREW W 14035 WEST RIVER ROAD INGLIS, FL 34449 US	Name: Address:
Title: Name: Address: City-St-Zip:	MGR () Delete WONSIK, JOHN D 14035 WEST RIVER ROAD INGLIS, FL 34449 US	Name: WONSIK, JOHN D Address: 4354 TAHITI DRIVE
Title: Name: Address: City-St-Zip:	MGRM () Delete WONSIK, CONNIE C 14035 WEST RIVER ROAD INGLIS, FL 34449 US	Name: WONSIK, CONNIE C Address: 4354 TAHITI DRIVE
Title: Name:	MGRM () Delete ASTROVE, ELLEN	Title: () Change () Addition Name:

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.

Address:

City-St-Zip:

SIGNATURE: CONNIE C WONSIK MGRM 05/16/2008