

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 12, 2007 8:00 am
Secretary of State

03-30-2007 90038 007 ****50.00

DOCUMENT # L05000079192 1. Entity Name VALENCIA OAKS, L.L.C.					
Principal Place of Business 6202 OAK RIVER TERRACE PORT ORANGE FL			Mailing Address 6202 OAK RIVER TERRACE PORT ORANGE FL		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 56-2531190				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FOSTER, WALTER E III 315 S. PALMETTO AVENUE DAYTONA BEACH FL			7. Name and Address of New Registered Agent Name KENNETH RUPP Street Address (P.O. Box Number is Not Acceptable) 6033 SANCTUARY GARDEN BLVD City PORT ORANGE FL Zip Code 32128		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title is acceptable.		KENNETH D. RUPP (NOTE: Registered Agent signature required when reappointing)		3-15-07 DATE	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RUPP, KEN 6202 OAK RIVER TERRACE PORT ORANGE FL	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:		Ken Rupp		1-29-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		386-304-5253 Daytime Phone #	