

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082542

Entity Name: WILDER OAKS, LLC

FILED  
Feb 26, 2009  
Secretary of State

## Current Principal Place of Business:

819 THOMPSON ROAD  
LITHIA, FL 33547

## New Principal Place of Business:

11505 E. BROADWAY,  
MANGO, FL 33550

## Current Mailing Address:

819 THOMPSON ROAD  
LITHIA, FL 33547

## New Mailing Address:

POST OFFICE BOX 428  
MANGO, FL 33550

FEI Number: 20-3560919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAMPP, YVETTE L  
819 THOMPSON ROAD  
LITHIA, FL 33547 US

## Name and Address of New Registered Agent:

JAEB, STEPHEN L  
11505 E. BROADWAY  
MANGO, FL 33550 US

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: STEPHEN L. JAEB

02/26/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LAMPP, WAYNE C  
Address: 819 THOMPSON ROAD  
City-St-Zip: LITHIA, FL 33547

Title: MGR ( ) Delete  
Name: JAEB, STEPHEN L  
Address: 11505 C.R. 574  
City-St-Zip: MANGO, FL 33550

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: JAEB, STEPHEN L  
Address: 11505 E. BROADWAY  
City-St-Zip: MANGO, FL 33550

Title: MGR (X) Change ( ) Addition  
Name: GARRETT, ROBERT R  
Address: 11505 E. BROADWAY  
City-St-Zip: MANGO, FL 33550

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: ROBERT R. GARRETT

MGR

02/26/2009

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