

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000118999

FILED
Jul 07, 2006
Secretary of State**Entity Name:** A.T. OAK, LLC**Current Principal Place of Business:**1150 W. MINNEOLA AVENUE
CLERMONT, FL 34711**New Principal Place of Business:****Current Mailing Address:**1150 W. MINNEOLA AVENUE
CLERMONT, FL 34711**New Mailing Address:****FEI Number:** 51-0563002**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EDGINGTON, TAMARA
1150 W. MINNEOLA AVENUE
CLERMONT, FL 34711 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:** MGRM () Delete
Name: TAMARA, EDGINGTON D MGRM
Address: 1150 W. MINNEOLA AVENUE
City-St-Zip: CLERMONT, FL 34711**Title:** MBR (X) Delete
Name: ADAM, EDGINGTON D MBR
Address: 1150 W. MINNEOLA AVENUE
City-St-Zip: CLERMONT, FL 34711**ADDITIONS/CHANGES:****Title:** MGMR (X) Change () Addition
Name: EDGINGTON, TAMARA
Address: 1150 W. MINNEOLA AVENUE
City-St-Zip: CLERMONT, FL 34711**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TAMARA EDGINGTON

MGMR

07/07/2006

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