

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004854

FILED
Apr 09, 2009
Secretary of State

Entity Name: SHADY OAKS MOBILE HOME PARK LLC

Current Principal Place of Business:

8654 NEW KINGS ROAD
JACKSONVILLE, FL 32219

New Principal Place of Business:

Current Mailing Address:

2825 LEWIS SPEEDWAY
STE 104
SAINT AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 20-4098833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNELL, WILLIAM H
2825 LEWIS SPEEDWAY
STE 104
ST AUGUSTINE, FL 32084 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: ASHDJI, FARID
Address: 45 ANASTASIA LAKES DR
City-St-Zip: ST AUGUSTINE, FL 32080

Title: MGRM () Delete
Name: FERRO, FRANK
Address: 262 HERMOSA CT
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: MGRM () Delete
Name: FERRO, IRENE
Address: 262 HERMOSA CT
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: MGRM () Delete
Name: TAWILL, LILLIAN
Address: 1421 SUZANNE WAY
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: DASYLVIA, JUDITH A
Address: 2 RISING MOON TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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:

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: FARID ASHDJI

MGRM

04/09/2009

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