

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000012074

Entity Name: OAK RIVER BUILDERS, LLC

FILED
Mar 31, 2007
Secretary of State

Current Principal Place of Business:

102 MASON STREET
SUITE 3
BRANDON, FL 33511 US

New Principal Place of Business:

504 BRANTWOOD COURT
VALRICO, FL 33594 US

Current Mailing Address:

102 MASON STREET
SUITE 3
BRANDON, FL 33511 US

New Mailing Address:

504 BRANTWOOD COURT
VALRICO, FL 33594 US

FEI Number: 74-3160908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RORY B. WEINER, P.A.
669A WEST LUMSDEN ROAD
BRANDON, FL 33511 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: HUBBARD, EDWARD
Address: 102 MASON STREET, STE. 3
City-St-Zip: BRANDON, FL 33511 US

Title: MGRM () Delete
Name: RIMOLDI, MICHAEL
Address: 102 MASON STREET, STE. 3
City-St-Zip: BRANDON, FL 33511 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HUBBARD, EDWARD
Address: 504 BRANTWOOD COURT
City-St-Zip: VALRICO, FL 33594 US

Title: MGRM (X) Change () Addition
Name: RIMOLDI, MICHAEL
Address: 504 BRANTWOOD COURT
City-St-Zip: VALRICO, FL 33594 US

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: MICHAEL RIMOLDI

MGMR

03/31/2007

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