

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028174

FILED
Jul 05, 2007
Secretary of State

Entity Name: AMERICAN OAKS INVESTMENTS, LLC

Current Principal Place of Business:

743 CHAMBERLIN TRIL
SAINT CLOUD, FL 34772

New Principal Place of Business:

Current Mailing Address:

743 CHAMBERLIN TRIL
SAINT CLOUD, FL 34772

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

IRWIN, JOSEPH C
743 CHAMBERLIN TRAIL
SAINT CLOUD, FL 34772 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ARCHIBALD, GARY
Address: 3027 DILLMAN DR.
City-St-Zip: ST.CLOUD, FL 34769

Title: MGRM () Delete
Name: ARCHIBALD, KEVIN
Address: 3650 MICHIGAN AVE
City-St-Zip: ST. CLOUD, FL 34769

Title: MGRM () Delete
Name: HARDY, DENISE
Address: 1505 EAGLES LANDING CT
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: IRWIN, JOSEPH C
Address: 743 CHAMBERLIN TRAIL
City-St-Zip: SAINT CLOUD, FL 34772

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:

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: JOSEPH C IRWIN

MR

07/05/2007

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