

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000058433

Entity Name: OAK LEAF, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7629 OLD MIDDLEBURG RD S  
JACKSONVILLE, FL 32222

**New Principal Place of Business:**

**Current Mailing Address:**

7629 OLD MIDDLEBURG RD S  
JACKSONVILLE, FL 32222

**New Mailing Address:**

FEI Number: 20-5078825

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONAGAS, MIRNA M  
1413 CANOPY OAKS DR  
ORANGE PARK, FL 32065 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: STD  
Name: MONAGAS, MIRNA M  
Address: 1413 CANOPY OAKS DR  
City-St-Zip: ORANGE PARK, FL 32065

Title: PD  
Name: DIAZ, LUIS R  
Address: 1413 CANOPY OAKS DR  
City-St-Zip: ORANGE PARK, FL 32065

I hereby 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: LUIS DIAZ

MGRM

04/30/2012

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