

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000102632

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** OCALA OFFICE VENTURES, LLC

**Current Principal Place of Business:**

1800 NW 58TH LANE  
OCALA, FL 34475 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 69  
ASTOR, FL 32102 US

**New Mailing Address:**

**FEI Number:** 20-5845989

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUNDEN, DANIEL R  
1800 NW 58TH LANE  
OCALA, FL 34475 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  
Name: HARD WORK VENTURES, LLC  
Address: 1800 NW 58TH LANE  
City-St-Zip: OCALA, FL 34475 US

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: HARDWORK VENTURES, LLC

MGRM

04/13/2011

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