

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000014697

Entity Name: OC PARTNERS, LLC

FILED  
Mar 23, 2009  
Secretary of State

## Current Principal Place of Business:

1801 S.W. 17TH ST.  
OCALA, FL 34471 US

## New Principal Place of Business:

1801 S.W. 17TH ST.  
OCALA, FL 34474 US

## Current Mailing Address:

1621 S.W. 19TH AVENUE  
OCALA, FL 34471 US

## New Mailing Address:

1621 S.W. 19TH AVENUE  
OCALA, FL 34474 US

FEI Number: 20-8405291

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REED, JEFFREY M  
1621 S.W. 19TH AVENUE  
OCALA, FL 34471 US

## Name and Address of New Registered Agent:

FABIAN, JOHN E JR  
1621 S.W. 19TH AVENUE  
OCALA, FL 34474 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: JOHN E FABIAN, JR.

03/23/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: PRES ( ) Delete  
Name: REED, JEFFREY M  
Address: 1621 S.W. 19TH AVENUE  
City-St-Zip: OCALA, FL 34471 US

Title: VP (X) Delete  
Name: FABIAN, JOHN JR.  
Address: 2931 S.E. 49TH AVE.  
City-St-Zip: OCALA, FL 34471

Title: TRES (X) Delete  
Name: LEWIS, EDWARD I  
Address: 1348 S.E. 5TH ST.  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: FRL, INC.,  
Address: 1621 S.W. 19TH AVENUE  
City-St-Zip: OCALA, FL 34474 US

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: JOHN E FABIAN, JR

MGR

03/23/2009

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