

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000023191

FILED
Apr 17, 2008
Secretary of State

Entity Name: ASHLEY OAKS PARTNERS, LLC

Current Principal Place of Business:

613 WEST ASHLEY STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

613 WEST ASHLEY STREET
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 20-8541436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOFFMAN, MARY
4500 SAN PABLO ROAD
JACKSONVILLE, FL 32224 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: D () Change (X) Addition
Name: PITTMAN, JUCOBY
Address: 10498 HAMLET TERRACE
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Change (X) Addition
Name: O'SHIELDS, JOSEPH
Address: 1301 RIVERPLACE BLVD., #1500
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Change (X) Addition
Name: WRIGHT, SHARON
Address: 6501 ARLINGTON EXPRESSWAY, #A156
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Change (X) Addition
Name: HARLAN, DOUG
Address: 225 WATER STREET, 5TH FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Change (X) Addition
Name: ONASANYA, BANDELE
Address: 2050 UNIVERSITY BLVD., N.
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Change (X) Addition
Name: MALLETT, RONALD
Address: 2801 DAWN ROAD
City-St-Zip: JACKSONVILLE, FL 32207

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: JUCOBY PITTMAN

D

04/17/2008

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