

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053118

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: LIVE OAK LAND HOOD ROAD, LLC

## Current Principal Place of Business:

2101 CENTREPARK WEST DRIVE, SUITE 100  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

2101 CENTREPARK WEST DRIVE  
100  
WEST PALM BEACH, FL 33409 US

## Current Mailing Address:

2101 CENTREPARK WEST DRIVE, SUITE 100  
WEST PALM BEACH, FL 33409

## New Mailing Address:

2101 CENTREPARK WEST DRIVE  
100  
WEST PALM BEACH, FL 33409 US

FEI Number: 26-0820871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CRANE, ROBERT L ESQ.  
515 N. FLAGLER DRIVE, SUITE 1800  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

LELONEK, JOSEPH D  
2101 CENTREPARK W DR  
100  
WEST PALM BEACH, FL 33409 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: JOSEPH D LELONEK

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LELONEK, JOSEPH D  
Address: 2101 CENTREPARK W DR 100  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGR ( ) Delete  
Name: BENTZ, ROBERT A  
Address: 2101 CENTREPARK W DR 100  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGR ( ) Delete  
Name: MORTON, JENNIFER L  
Address: 2101 CENTREPARK W DR 100  
City-St-Zip: WEST PALM BEACH, FL 33409 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: HOOD ROAD HOLDINGS, LLC  
Address: 2101 CENTREPARK W DR 100  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGR (X) Change ( ) Addition  
Name: TIGHE, JENNIFER M  
Address: 2101 CENTREPARK W DR 100  
City-St-Zip: WEST PALM BEACH, FL 33409 US

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 D LELONEK

MGR

04/30/2009

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