

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087931

Entity Name: 1014 N OLIVE AVE LLC

FILED
Jul 04, 2008
Secretary of State

Current Principal Place of Business:

76 PRINCEWOOD LANE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

1014 N OLIVE AVENUE
WEST PALM BEACH, FL 33401

Current Mailing Address:

76 PRINCEWOOD LANE
PALM BEACH GARDENS, FL 33410

New Mailing Address:

1014 N OLIVE AVENUE
WEST PALM BEACH, FL 33401

FEI Number: 26-0791322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ROCA, RAFAEL J
1014 N OLIVE AVENUE
WEST PALM BEACH, FL 33401 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 () Delete
Name: JONES, RENEE
Address: 76 PRINCEWOOD AVENUE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM () Delete
Name: ROCA, RAFAEL J
Address: 1014 N OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JONES, RENEE
Address: 76 PRINCEWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: RENEE JONES

MGRM

07/04/2008

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