

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115969

FILED
Apr 27, 2011
Secretary of State

Entity Name: OSB REACQUISITION, LLC

Current Principal Place of Business:

250 NORTH ORANGE AVENUE
15TH FLOOR
ORLANDO, FL 32801 US

New Principal Place of Business:

620 CHESTNUT STREET
CONWAY, AR 72032 US

Current Mailing Address:

250 NORTH ORANGE AVENUE
15TH FLOOR
ORLANDO, FL 32801 US

New Mailing Address:

620 CHESTNUT STREET
CONWAY, AR 72032 US

FEI Number: 20-2672606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CENTENNIAL BANK
250 N ORANGE AVENUE
15TH FLOOR
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

CENTENNIAL BANK
1200 HILLCREST STREET
SUITE 102
ORLANDO, FL 32803 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: RANDY E MAYOR

04/27/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: RIVIERE, STEPHEN R
Address: 1200 HILLCREST STREET, SUITE 102
City-St-Zip: ORLANDO, FL 32803 US

Title: MGR
Name: SIMS, C. RANDALL
Address: P O BOX 966
City-St-Zip: CONWAY, AR 72033 US

Title: MGR
Name: FRENCH, TRACY M
Address: P O BOX 966
City-St-Zip: CONWAY, AR 72033 US

Title: MGR
Name: HESTER, KEVIN D
Address: P O BOX 966
City-St-Zip: CONWAY, AR 72033 US

Title: MGR
Name: MAYOR, RANDY E
Address: P O BOX 966
City-St-Zip: CONWAY, AR 72033 US

Title: MGR
Name: LANKFORD, MERESA I
Address: P O BOX 950519
City-St-Zip: LAKE MARY, FL 32795 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: RANDY E MAYOR

MGR

04/27/2011

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