

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000123462

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** POINT OF ROCKS OASIS, LLC

**Current Principal Place of Business:**

1715 STICKNEY POINT RD.  
SARASOTA, FL 342318869 US

**New Principal Place of Business:**

1715 STICKNEY POINT RD.  
SARASOTA, FL 34231 US

**Current Mailing Address:**

1715 STICKNEY POINT RD.  
SARASOTA, FL 342318869 US

**New Mailing Address:**

1715 STICKNEY POINT RD.  
SARASOTA, FL 34231 US

**FEI Number:** 65-0496317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCARLETT, DONALD W JR.  
2940 S. TAMiami TRAIL  
SARASOTA, FL 34239 US

**Name and Address of New Registered Agent:**

BARNETT, MARGUERITE P MD  
1715 STICKNEY POINT ROAD  
SARASOTA, FL 34231 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:** MARGUERITE P BARNETT, MD

04/28/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** BARNETT, MARGUERITE P MD  
**Address:** 1715 STICKNEY POINT RD.  
**City-St-Zip:** SARASOTA, FL 34231 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:** MARGUERITE P BARNETT, MD

MGRM

04/28/2010

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