

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006127

Entity Name: HARMONY OAKS, LLC

FILED
Aug 17, 2009
Secretary of State

Current Principal Place of Business:

2934 CABALLERO CT.
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

2934 CABALLERO CT.
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 26-4465103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

RAITZ A, MATTHEW J
2934 CABALLERO CT.
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

RAITZ, MATTHEW J
2934 CABALLERO CT.
JACKSONVILLE, FL 32217 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: MATTHEW J. RAITZ

08/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAITZ, RAYMOND L
Address: 1438 MITCHELL AVE.
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: RAITZ, MATTHEW J
Address: 1438 MITCHELL AVE.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAITZ, RAYMOND L
Address: 606 4TH AVE. W
City-St-Zip: PALMETTO, FL 34221

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: MATTHEW J. RAITZ

MGRM

08/17/2009

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