

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000041894

Entity Name: OSKEY & OSKEY, LLC

**FILED**  
**Sep 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

12452 PRATHER AVENUE  
PORT CHARLOTTE, FL 33981

**New Principal Place of Business:**

232 TARPON ST  
TAVERNIER, FL 33070

**Current Mailing Address:**

12452 PRATHER AVENUE  
PORT CHARLOTTE, FL 33981

**New Mailing Address:**

232 TARPON ST  
TAVERNIER, FL 33070

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

WALLIS, DONALD W  
780 N PONCE DE LEON BLVD  
ST AUGUSTINE, FL 32084 US

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

OSKEY, MIMI  
232 TARPON ST  
TAVERNIER, FL 33070 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: MIMI OSKEY

09/23/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: OSKEY, META M  
Address: 232 TARPON ST  
City-St-Zip: TAVERNIER, FL 33070

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: MIMI OSKEY

MGR

09/23/2010

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