

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000059293

FILED
Jan 04, 2011
Secretary of State

Entity Name: DRIPPING OAKS LLC

Current Principal Place of Business:

5118 CR 300A
LAKE PANASOFFKEE, FL 33538

New Principal Place of Business:

Current Mailing Address:

5118 CR 300A
LAKE PANASOFFKEE, FL 33538

New Mailing Address:

FEI Number: 27-0426281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, DARYLE C
5118 CR 300A
LAKE PANASOFFKEE, FL 33538 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
Name: TOWNE, SR., KEVIN B
Address: PO BOX 1527
City-St-Zip: SUMMERFIELD, FL 34492

Title: MGRM
Name: TOWNE, JAMES K
Address: PO BOX 1304
City-St-Zip: FRUITLAND PARK, FL 34731

Title: MGRM
Name: NICHOLS, DARYLE C
Address: 5118 CR 300A
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: MGRM
Name: PERSAMPIERI, SUZANNE
Address: 2626 NW 68TH AVE
City-St-Zip: GAINESVILLE, FL 32653

Title: MGRM
Name: NICHOLS, DARYLE
Address: 5118 CR 300A
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: MGRM
Name: WHITAKER, DARYLE
Address: 4710 W OAKELLAR AVE
City-St-Zip: TAMPA, FL 33611

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: DARYLE NICHOLS

MGRM

01/04/2011

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