

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # M02000001193

1. Entity Name
COUNTRY LIFE OF OHIO, L.L.C.



Principal Place of Business
1826 SOUTH MAIN STREET
AKRON, OH 44301

Mailing Address
1826 SOUTH MAIN STREET
AKRON, OH 44301



01042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 38-3650234	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, JAMES L
7100 SUNSET WAY PH 7 WEST
ST. PETE BEACH, FL 33706

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restate)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000784775
01/16/08-80070-004 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	COOK, JAMES L
STREET ADDRESS	7100 SUNSET WAY PH 7 WEST
CITY-ST-ZIP	ST. PETE BEACH, FL 33706
TITLE	MGRM
NAME	COOK, DAVID L
STREET ADDRESS	1826 S. MAIN STREET
CITY-ST-ZIP	AKRON, OH 44301
TITLE	MGRM
NAME	WOLFE, TERRY W
STREET ADDRESS	1826 S. MAIN STREET
CITY-ST-ZIP	AKRON, OH 44301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: DAVID L. COOK

1-7-08 330 773 3351