2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M03000000444

1. Entity Name

ORANGEWOOD MOBILE HOME PARK, LLC



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

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)

4. FEI Number 11-3676128 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, JAMES L 7100 SUNSET WAY, PH7 WEST ST PETE BEACH, FL 33700

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| 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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE, Registered Agent signature required when reinstating)

DATE

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

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|--|--|
| 9. | MANAGING MEMBERS/MANAGERS |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR COOK, DAVID L 1826 SOUTH MAIN STREET AKRON, OH 44301 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR COOK, JAMES L 7100 SUNSET WAY, PH7 WEST ST PETE BEACH, FL 33706 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY: ST-ZIP | |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes if further certify that the information indicated on this report is truli 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 of trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

DAVID L. COOK

<u>1-10-08 330773 3351</u>