### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **DOCUMENT # M06000004986**

1. Entity Name

OXYMAGIC OF NORTHWEST FLORIDA, L.L.C.



FILED Jan 25, 2007 08:00 AM Secretary of State

Principal Place of Business

2317 OAK CREST CIR. MIAMI, OK 74354 Mailing Address

2317 OAK CREST CIR. MIAMI, OK 74354



DO NOT WRITE IN THIS SPACE

01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 30-0375418

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HESS, GEORGE W 31 MANOR DRIVE PENSACOLA, FL 32507

## 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.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

#### Filing Fee is \$50.00 Due by May 1, 2007

I	9. MANAGING MEMBERS/MANAGERS		
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROBINSON, DAVID A 2317 OAK CREST CIR. MIAMI, OK 74354	
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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. 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 of the repeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/2/07

918540 0444

Daytime Phone