2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000007177

Entity Name: CABOT OAK GROVE 25 LLC

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O NATIONAL CORPORATE RESEARCH, LTD. 615 SOUTH DUPONT HIGHWAY

DOVER, DE 19901

Current Mailing Address: New Mailing Address:

C/O NATIONAL CORPORATE RESEARCH, LTD. 615 SOUTH DUPONT HIGHWAY **DOVER, DE 19901**

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

NATIONAL CORPORATE RESEARCH, LTD., INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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:

MANAGING MEMBERS/MANAGERS:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition LOCKHART, ROONEY L LOCKHART, RODNEY L Name: Name: Address: 140 W HILLS CT Address: 1212 FALL CREEK RD, UNIT 9 City-St-Zip: HARRIMAN, TN 37748 City-St-Zip: KINGSPORT, TN 37664

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: LOCKHART, ELFREDA L Name: LOCKHART, ELFREDA L Address: 140 W HILLS CT Address: 1212 FALL CREEK RD. UNIT 9 City-St-Zip: HARRIMAN, TN 37748 City-St-Zip: KINGSPORT, TN 37664

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: TIMOTHY KROLL **MGRM** 04/08/2009