

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000172384

**Entity Name:** SILVER OAK VENTURES, LLC

**Current Principal Place of Business:**

1635 EAGLE HARBOR PKWY  
SUITE 4  
FLEMING ISLAND, FL 32003

**Current Mailing Address:**

1635 EAGLE HARBOR PKWY  
SUITE 4  
FLEMING ISLAND, FL 32003

**FEI Number:** 47-5296496

**Certificate of Status Desired:** No

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

NICHOLS, ESTHER D  
1635 EAGLE HARBOR PKWY  
SUITE 4  
FLEMING ISLAND, FL 32003 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name WHITE, BRENT  
Address 4279 CEDAR ROAD  
City-State-Zip: ORANGE PARK FL 32065

Title MGR  
Name NICHOLS, JOHN  
Address 1635 EAGLE HARBOR PKWY, STE 4  
City-State-Zip: FLEMING ISLAND FL 32003

Title MGR  
Name NICHOLS, ESTHER  
Address 1635 EAGLE HARBOR PKWY STE 4  
City-State-Zip: FLEMING ISLAND FL 32003

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ESTHER NICHOLS

**MBR**

**03/22/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date