

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000104118

Entity Name: OAK GROVE RESORT, LLC

Current Principal Place of Business:

500 SOUTH MAIN STREET
LABELLE, FL 33935

Current Mailing Address:

500 SOUTH MAIN STREET
LABELLE, FL 33935 US

FEI Number: 81-2811368

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

POTTER, PATRICIA J ESQ.
3435 TENTH STREET NORTH
SUITE 303
NAPLES, FL 34103 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	AMBR	Title	AMBR
Name	HENTHORNE, DAN R	Name	HENTHORNE, LORRAINE
Address	500 SOUTH MAIN STREET	Address	500 SOUTH MAIN STREET
City-State-Zip:	LABELLE FL 33935	City-State-Zip:	LABELLE FL 33935

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: DAN R HENTHORNE

AMBR

01/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date