

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000247004

**Entity Name:** LIVE OAK 1801 LLC

**Current Principal Place of Business:**

1213 PAWNEE TERRACE  
INDIAN HARBOUR BEACH, FL 32937

**Current Mailing Address:**

1213 PAWNEE TERRACE  
INDIAN HARBOUR BCH, FL 32937 US

**FEI Number:** 82-3716630

**Certificate of Status Desired:** No

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

PICKTON, ROBERT J  
422 EMERALD DRIVE SOUTH  
INDIAN HARBOUR BEACH, FL 32937 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  
Name            PICKTON, SHIRLEY W  
Address        1213 PAWNEE TERRACE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title            AMBR  
Name            PICKTON, ROBERT J  
Address        422 EMERALD DRIVE SOUTH  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title            MGR  
Name            PICKTON, ERICK W  
Address        1213 PAWNEE TERRACE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title            AMBR  
Name            PICKTON, JING LI  
Address        1213 PAWNEE TERRACE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

*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:** SHIRLEY PICKTON

**MGRM**

**01/10/2024**

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

\_\_\_\_\_  
Date