

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000044438

**FILED  
Jun 20, 2008  
Secretary of State**

**Entity Name:** PATTERSON FAMILY, LLC

**Current Principal Place of Business:**

6023 HAMMOCK WOODS DRIVE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

6023 HAMMOCK WOODS DRIVE  
ODESSA, FL 33556

**New Mailing Address:**

FEI Number: 20-1251770      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

PATTERSON, ROBERT L  
6023 HAMMOCK WOODS DRIVE  
ODESSA, FL 33556 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: PATTERSON FAMILY L.L., .C.  
Address: 6023 HAMMOCK WOODS DRIVE  
City-St-Zip: ODESSA, FL 33556 US

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT L. PATTERSON

MGR

06/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date