


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 26, 2007 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # L05000053342 |  |
| 1. Entity Name 368 GREGORY ROAD LLC | |

| | |
|---|---|
| Principal Place of Business 105 S. NARCISSUS AVENUE 200 WEST PALM BEACH, FL 33401 US | Mailing Address 105 S. NARCISSUS AVENUE 200 WEST PALM BEACH, FL 33401 US |
|---|---|

DO NOT WRITE IN THIS SPACE



02192007 No Chg-LLC CR2E083 (11/05)

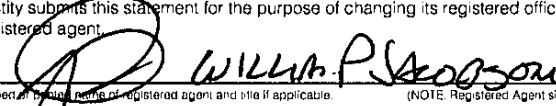
| | |
|---|--------------------------------|
| 4. FEI Number 47-0956190 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

WILLIAM P. JACOBSON P.A.
105 S. NARCISSUS AVENUE
200
WEST PALM BEACH, FL 33401

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IN THIS SPACE**

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  WILLIAM P. JACOBSON

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

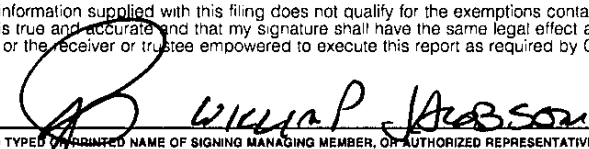
**Filing Fee is \$50.00
Due by May 1, 2007**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM JACOBSON, WILLIAM P 105 S. NARCISSUS AVENUE WEST PALM BEACH, FL 33401 |
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03/08/07-60001-014 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  WILLIAM P. JACOBSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date 2/22/07 36-833-4440
Daytime Phone *