

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 28, 2008  
Secretary of State**

DOCUMENT# L05000097154

Entity Name: SEVENTY EIGHTH PROPERTIES LLC

**Current Principal Place of Business:**

8321 SUMMER GROVE ROAD  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

8321 SUMMER GROVE ROAD  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 20-3560160      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:**

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

AZAM, CHOWDHURY  
8321 SUMMER GROVE ROAD  
TAMPA, FL 33647      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

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM      ( ) Delete  
Name: AKTHER, RAHIMA  
Address: 8321 SUMMER GROVE ROAD  
City-St-Zip: TAMPA, F 33647

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

Title: MGRM      ( ) Delete  
Name: AZAM, CHOWDHURY  
Address: 8321 SUMMER GROVE ROAD  
City-St-Zip: TAMPA, FL 33647

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: RAHIMA AKTHER

MGRM

05/28/2008

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