2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000004211

1. Entity Name
SARASOTA REAL ESTATE LLC

Principal Place of Business	Mailing Address
354 BOB WHITE DRIVE SARASOTA, FL 34236	354 BOB WHITE DRIVE SARASOTA, FL 34236

01312008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-0692047
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BOGUSZEWSKI, JOSEPH W
354 BOB WHITE DR
SARASOTA, FL 34236

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BOGUSZEWSKI, JOSEPH W
STREET ADDRESS	354 BOB WHITE DR
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGR
NAME	BILSKI, KRIS
STREET ADDRESS	238 UPLAND ROAD
CITY-ST-ZIP	REDWOOD CITY, CA 94062
TITLE	MGRM
NAME	ERGANG, ROMAN
STREET ADDRESS	BOYNEBURGER STR 7
CITY-ST-ZIP	ESCHWEGE, GR 37169
TITLE	MGRM
NAME	KNIESE, BOGDA MARIE
STREET ADDRESS	BOYNEBURGER STR 7
CITY-ST-ZIP	ESCHWEGE, GR 37269
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000917269
05/13/08-80032-015 138.75

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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: _____ 4/15/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #