## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000011052

City-St-Zip:

MGRM

Title:

Name:

Address:

City-St-Zip:

ALTAMONTE SPRINGS, FL 32714

( ) Delete

WALSH, CHRISTOPHER S

2214 LUFF OAK STREET

APOPKA, FL 32712

Entity Name: OLD COUNTRYSIDE, LLC

FILED Apr 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 907 WHITEWATER COURT 25541 SR 46 ALTAMONTE SPRINGS, FL 32714 SUITE #3 SORRENTO, FL 32776 **Current Mailing Address: New Mailing Address:** 25541 SR 46 907 WHITEWATER COURT SUITE #3 ALTAMONTE SPRINGS, FL 32714 SORRENTO, FL 32776 FEI Number: 59-3730080 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALSH, ROBERT S KEENAN, MARK A 907 WHITEWATER CT. 25541 SR 46 ALTAMONTE SPRINGS, FL 32714 US SUITE #3 SORRENTO, FL 32776 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: MARK A KEENAN 04/26/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WALSH, ROBERT S Name: Name: 31109 PAYNE ROAD Address: Address: City-St-Zip: SORRENTO, FL 32776 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SEARS, SAMUEL F Name: Name: Address: 740 MUIRFIELD CIR Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KEENAN, MARK A Name: Name: 500 PICKFORD PT. Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: KEENAN, JOHN C Name: Address: 907 WHITEWATER CT. Address:

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.

City-St-Zip:

() Change () Addition

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MARK A KEENAN MGRM 04/26/2007