

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016256

FILED
Apr 15, 2009
Secretary of State

Entity Name: MISSION BAY EQUESTRIAN CENTER, LLC

Current Principal Place of Business:

704 OSMOSIS DRIVE, S.W.
PALM BAY, FL 32908

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 201
YANKEETOWN, FL 34498

New Mailing Address:

FEI Number: 59-3754051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHAN, LAWRENCE L
5107 RIVERSIDE DRIVE
YANKEETOWN, FL 34498 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: MGRM () Delete
Name: COHAN, LAWRENCE L
Address: P.O. BOX 201- 5107 RIVERSIDE DRIVE
City-St-Zip: YANKEETOWN, FL 34498 US

Title: MGRM () Delete
Name: COHAN, LINDA J
Address: P.O. BOX 201 - 5107 RIVERSIDE DRIVE
City-St-Zip: YANKEETOWN, FL 34498 US

ADDITIONS/CHANGES:

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

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: LAWRENCE L COHAN

MGRM

04/15/2009

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