

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000018198

1. Entity Name

SOUTH STAR TRUST, LLC



Principal Place of Business

2328 TENTH AVENUE NORTH, STE. 403
LAKE WORTH, FL 33461-6606

Mailing Address

2328 TENTH AVENUE NORTH, STE. 403
LAKE WORTH, FL 33461-6606



01232008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1148755

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUKIN, ROGER
2328 TENTH AVENUE NORTH, STE. 403
LAKE WORTH, FL 33461-6606

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME JAMES B. RUKIN REVOCABLE TRUST
STREET ADDRESS 2328 10TH AVE N STE 403
CITY-ST-ZIP LAKE WORTH, FL 334616606

TITLE MGRM
NAME JULIA R. RUKIN REVOCABLE TRUST
STREET ADDRESS 2328 10TH AVE N STE 403
CITY-ST-ZIP LAKE WORTH, FL 334616606

TITLE MGR
NAME RUKIN, ROGER B
STREET ADDRESS 2328 10TH AVE N STE 403
CITY-ST-ZIP LAKE WORTH, FL 334616606

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone

[Signature] ROGER B. RUKIN 1-28-08 5615860100