

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018506

Entity Name: SAKI HAMMOCK L.L.C.

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

13907 CARROLLWOOD VILLAGE RUN
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

13014 N DALE MABRY HWY
SUITE 356
TAMPA, FL 33618

New Mailing Address:

FEI Number: 59-3752477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRBANKS, GARY
13014 N. DALE MABRY HWY
SUITE 356
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

FAIRBANKS, GARY
13907 CARROLLWOOD VILLAGE RUN
TAMPA, FL 33618 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:

04/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHWENCKE, KIM M
Address: 13014 N DALE MABRY HWY SUITE 356
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: RAPPAPORT, ALEXANDER G
Address: 13014 N DALE MABRY HWY SUITE 356
City-St-Zip: TAMPA, FL 33618

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: KIM M. SCHWENCKE

MGR

04/09/2009

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