


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


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**FILED**  
**Mar 12, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L02000000020	
1. Entity Name DREAM BELIEVER STABLES, LLC	

Principal Place of Business 1313 PALERMO WAY LANTANA, FL 33462	Mailing Address 1313 PALERMO WAY LANTANA, FL 33462
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DO NOT WRITE IN THIS SPACE

  
 03082008No Chg-LLC      CR2E083 (12/07)

4. FEI Number 56-2306207	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent  COLOMBINO, ANDREA 1313 PALERMO WAY LAKE WORTH, FL 33462	DO NOT WRITE IN THIS SPACE
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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**

U000000854692

03/27/08-80017-023 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COLOMBINO, LUCIANO F 1313 PALERMO WAY LANTANA, FL 33462
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COLOMBINO, KATHLEEN MARIE 1313 PALERMO WAY LANTANA, FL 33462
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COLOMBINO, ANDREA K 1313 PALERMO WAY LAKE WORTH, FL 33462
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DO NOT WRITE  
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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: <u>Kathleen Marie Colombino Kathleen Marie Colombino</u>	Date: <u>3/10/08</u>	Daytime Phone #: <u>561-533-0811</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #