## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **FILED** Jan 11, 2007 08:00 AN DOCUMENT # L02000013359 **Secretary of State** SHORELINE LAKE, L.L.C. Mailing Address Principal Place of Business 1346 PRESERVATION WAY 1346 PRESERVATION WAY OLDSMAR, FL 34677 OLDSMAR, FL 34677 01042007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 53-6544892 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GASSMAN, ALAN S ESQ DO NOT WRITE 1245 COURT STREET, SUITE 102 CLEARWATER, FL 33756 IN THIS SPACE 5. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fjorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signisture required when remetating) DATE Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MCR TITLE BRODSKY, NORMAN J NAME 1346 PRESERVATION WAY STREET ADDRESS CITY-ST-78 OLDSMAR, FL 34677 TITLE NAME 100000582154 STREET ADDRESS 01/11/07-80020-012 55.00 CITY-ST-ZIP IME NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE MAIN STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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.

STREET ADDRESS CITY-ST-7IP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OF UTHORIZED REPRESENTATIVE