2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Apr 09, 2008 8:00 am Secretary of State **DOCUMENT # L02000014852** 04-09-2008 90122 026 ***138.75 LUTZ HOLDINGS L.L.C. Principal Place of Business Mailing Address 278 CRYSTAL GROVE BLVD. 278 CRYSTAL GROVE BLVD. 60020975 LUTZ, FL 33548 LUTZ, FL 33548 04082008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For <u>51-04</u>53518 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent LIVINGSTON, CLIFTON A DO NOT WRITE 278 CRYSTAL GROVE BLVD. LUTZ, FL 33548 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 MGRM TITLE LIVINGSTON, CLIFTON A NAME 278 CRYSTAL GROVE BLVD. STREET ADDRESS CITY-ST-ZIP LUTZ, FL 33548 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

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 empoyered to execute this report as required by Chapter 608, Florida Statutes.