

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000016503

1. Entity Name
PINE KNOLLS PARTNERS, LLC



Principal Place of Business
806 QUITMAN HWY. NORTH
GREENVILLE, FL 32331

Mailing Address
806 QUITMAN HWY. NORTH
GREENVILLE, FL 32331



01142008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1437985

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOYD, STEPHANIE R
806 QUITMAN HWY. NORTH
GREENVILLE, FL 32331

**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

U000000791972
01/23/08-80097-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

P
MATHIS, CAROL BERGER
129 KIMBERLY RD
EAST GRANBY, CT 06026

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

ST
BERGER, EDWARD JOHN
12 STILLMAN LN
PLEASANTVILLE, NY 10570

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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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 #

1/17/07 850-997-6222