


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L02000018427</b> 1. Entity Name ZBT, LLC	
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Principal Place of Business 2100 19T ST SARASOTA, FL 34234	Mailing Address 2100 19TH ST SARASOTA, FL 34234
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**DO NOT WRITE IN THIS SPACE**



01042008 No Chg-LLC

CR2E083 (12/07)

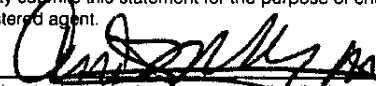
4. FEI Number 13-4203879	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  UCCELLO, ANTONIO F III 2100 19TH ST SARASOTA, FL 34234
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**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  DATE 1/4/08

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

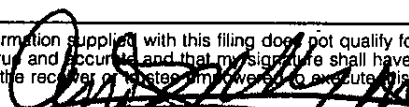
**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U000000777464  
01/10/08-80008-021 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR UCCELLO, ANTONIO F III 2100 19TH ST SARASOTA, FL 34234
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
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 recorder or state tax collector who executed this report as required by Chapter 608, Florida Statutes.



**SIGNATURE:** 1/4/08 941.330.0336

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #