2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2008
Secretary of State

DOCUMENT# L02000020845

Entity Name: TREASURE COAST PREFERRED PROPERTIES, L.L.C.

Current Principal Place of Business:

756 S.E. PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

756 S.E. PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34984

New Mailing Address:

FEI Number: 14-1844654 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BREAULT, LARRY
756 S.E. PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34984 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: VP ( ) Delete
Name: BREAULT, MEREDITH
Address: 756 SE POST ST BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: P ( ) Delete
Name: BREAULT, LARRY
Address: 756 SE PORT ST LUCIE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P ( ) Change (X) Addition
Name: LICAUSI, PAUL MR
Address: 756 SE PORT ST. LUCIE BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34984 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MEREDITH BREAULT P 03/11/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date