## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the Strate of Fordat. I am familiar with, and at the obligations of registered agent.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the Strate of Fordat. I am familiar with, and at the obligations of registered agent.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the Strate of Fordat. I am familiar with, and at the obligations of registered agent.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the Strate of Fordat. I am familiar with, and at the obligations of registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligations of registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligations of registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligations of registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligations of registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligations of registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligation of Registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligation of Registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligation of Registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligation of Registered agent, or both, in the Strate of Fordat. I am familiar with, and at the Obligation of Registered agent.  8. The above named entity submits the state of Fordat. I am familiar with, and at the Obligation of Registered agent.  9.	ANNUAL REPORT				SECRE	TARY OF STATE
### A01 SUB STATION ROAD VENICE, FL 34292  #### A01 SUB STATION ROAD VENICE, FL 34292  ##################################	1. Entity Name				08 APR 1	F CORPORATIONS  I AM 10: 15
DO NOT WRITE IN THIS SPACE    A. FEI Number   Applied   Fee Number   Fee Negutier   Fee Required	401 SUB STA	ATION ROAD	401 SUB STATION ROAD		 	Il besir ilbi: birki kirki (1814 birki) iliyeki
WEED, LLOYD 401 SUB STATION ROAD VENICE, FL 34292  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 at the obligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS \$138.75  After May 1, 2008 Fee will be \$538.75  9. MANAGING MEMBERS/MANAGERS  TILE NAME SIREEL ADDRESS CITY-ST-2P  ANAGENGESS CITY-ST-2P  TILE NAME SIREEL ADDRESS CITY-ST-2P  DO NOT WRITE IN THIS SPACE  DO NOT WRITE IN THIS SPACE	D		- "	CE	01042008 No Chg-LLC  4. FEI Number 76-0716169	CR2E083 (12/07)  Applied For Not Applicable  \$5.00 Additional
THE HODRESS CITY-ST-ZIP TITLE	401 SUB S	OYD STATION ROAD	egistered Agent		. — •	
After May 1, 2008 Fee will be \$538.75  9. MANAGING MEMBERS/MANAGERS  TITLE MGR NAME DEATERLY, DEE 401 SUB STATION RD VENICE, FL 34292  TITLE NAME STREET ADDRESS CITY-ST-2P  TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P  TITLE NAME STREET ADDRESS STREET ADDRE	the obligati	ions of registered agent.				, , , , , , , , , , , , , , , , , , ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS					2001232 04/14/0801010	23 <b>74</b> 52 027 **727.50
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11. I hereby certify that the information supplied with this filling 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 musignature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or manager of the execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE