

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026251

FILED
Feb 12, 2007
Secretary of State

Entity Name: SOUTHERN SHORES ACQUISITIONS, L.L.C.

Current Principal Place of Business:

560 S ANDREWS AVE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

560 S ANDREWS AVE
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 30-2024059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURCOTTE, MARIO
560 SW 12TH AVENUE
POMPANO BEACH, FL 33069 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: MGRM () Delete
Name: O'BRIEN, DANIEL
Address: 2610 NE 19TH ST
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM () Delete
Name: GODIN, ARTHUR
Address: 3304 ROBBINS RD
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR () Delete
Name: TURCOTTIE, MARIO
Address: 560 SW 12TH AVE
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: O'BRIEN, DANIEL
Address: 10376 WEST TARA BLVD
City-St-Zip: BOYNTON BEACH, FL 33437

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIO TURCOTTE

MGR

02/12/2007

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