## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

## **FILED** Mar 10, 2008 08:00 A DOCUMENT # L02000030180 1. Entity Name Secretary of State DELRAY LAND HOLDINGS, LLC Principal Place of Business Mailing Address 1360 N.W. 33RD STREET 1360 N.W. 33RD STREET POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc Suite, Apt. #, etc 1st MOORE CR2E083 (10/07) City & State City & State 4. FEI Number Applied For 20-0318664 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RETTERATH, STEVEN Street Address (P.O. Box Number is Not Acceptable) 1241 ROYAL PALM WAY **BOCA RATON FL 33432** Zip Code City 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, typed or or predinance of registered agent and title if explicable (NOTE Royalered Agent's gliature roguired when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. TITLE Delete TiTLE ☐ Change Addition NAME RETTERATH, STEVEN MARKE STREET ADDRESS 1241 ROYAL PALM WAY STREET ADDRESS U00000852296 CITY - ST- ZIP BOCA RATON FL 33432 CITY+ST-Z:P <u> 26./08--80023--002</u> THE ☐ Delete TITLE Change Addition NAME RAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZaP THE ☐ Delete HILE Change Addr:on NAME MAME STREET ADDRESS STREET ALIORESS CITY-ST-ZIP CITY - ST - Z:P TITLE ☐ Delete TITLE Change TT Addition NAME NAME STREET ADDRESS STRELT ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY- ST-ZiP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- 7(P CITY-ST-ZiF 11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.