

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000000196

1. Entity Name
CLOUD NINE FLORIDA, L.C.



Principal Place of Business
**25418 E. MARION AVENUE
002
PUNTA GORDA, FL 33950**

Mailing Address
**25418 E. MARION AVENUE
002
PUNTA GORDA, FL 33950**

FILED
Apr 26, 2007 08:00 AM
Secretary of State



01082007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

13-4234288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MILLER, H. DAVIES
25418 E. MARION AVENUE
002
PUNTA GORDA, FL 33950**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MILLER, H. DAVIES JR
25418 E. MARION AVENUE
PUNTA GORDA, FL 33950**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BENSON, SUSAN M
82 FISCHER CIRCLE
PORTSMOUTH, RI 02871**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MILLER, ARTHUR A
5 LANTERN HILL ROAD
GUILFORD, CT 06413**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000734837
05/10/07-80010-007 50.00

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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE