

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003711

Entity Name: PINES B-5, LLC

FILED  
Mar 31, 2008  
Secretary of State

**Current Principal Place of Business:**

2979 PGA BLVD  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

2979 PGA BLVD  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 20-0755379

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WALCZAK, PAUL M  
2979 PGA BOULEVARD  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

SHELDON, SIOBAUGHN  
2979 PGA BOULEVARD  
PALM BEACH GARDENS, FL 33410 US

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: SIOBAUGHN

03/31/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WALCZAK, PAUL  
Address: 2979 PGA BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WALCZAK, PAUL  
Address: PO BOX 31809  
City-St-Zip: PALM BEACH GARDENS, FL 33420

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: PAUL M WALCZAK

MGRM

03/31/2008

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