


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 17, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000010204

1. Entity Name
FERN VALLEY, LLC



Principal Place of Business --- Mailing Address

4302 ALTON ROAD, STE. 670 **4302 ALTON ROAD, STE. 670**
MIAMI BEACH, FL 33140 **MIAMI BEACH, FL 33140**

DO NOT WRITE IN THIS SPACE



07092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 57-1162133	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NASH, SEYMOUR C
4302 ALTON ROAD, STE. 670
MIAMI BEACH, FL 33140

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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 September 14, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VALLEY MANAGEMENT, INC. 4302 ALTON ROAD, STE. 670 MIAMI BEACH, FL 33140
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 07/17/07-80004-015 50.00

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: *Seymour C Nash* *7/13/07*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #