

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 24, 2005 8:00 am**  
**Secretary of State**

03-24-2005 90203 041 \*\*\*\*50.00

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<b>DOCUMENT # L03000010589</b> 1. Entity Name WIN & PLACE STABLE VII, LLC																											
Principal Place of Business 400 S OCEAN BLVD. R-26 BOCA RATON, FL 33432		Mailing Address 400 S OCEAN BLVD. R-26 BOCA RATON, FL 33432																									
2. Principal Place of Business Suite, Apt. #, etc. 365 Hamlet Drive City & State Delray Beach, FL Zip 33445 Country USA		3. Mailing Address Suite, Apt. #, etc. 365 Hamlet Drive City & State Delray Beach, FL Zip 33445 Country USA																									
4. FEI Number 81-0596093		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		02092005 Chg-LLC CR2E083 (10/03)																									
6. Name and Address of Current Registered Agent FRISINA, RICHARD 400 S OCEAN BLVD. R-26 BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Name Frisina, Richard Street Address (P.O. Box Number is Not Acceptable) 365 Hamlet Drive City Delray Beach FL Zip Code 33445																									
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 <u>Richard Frisina</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>2/2/05</u>																											
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">MGRM</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>FRISINA, RICHARD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>400 S. OCEAN BLVD., R-26</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BOCA RATON, FL 33432</td> <td></td> </tr> </table>		TITLE	MGRM	<input type="checkbox"/> Delete	NAME	FRISINA, RICHARD		STREET ADDRESS	400 S. OCEAN BLVD., R-26		CITY-ST-ZIP	BOCA RATON, FL 33432		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">MGRM</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Frisinga, Richard</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>365 Hamlet Drive</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Delray Beach, FL 33445</td> <td></td> </tr> </table>		TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Frisinga, Richard		STREET ADDRESS	365 Hamlet Drive		CITY-ST-ZIP	Delray Beach, FL 33445	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Richard Frisina</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date <u>2/2/05</u> Daytime Phone # _____																									