

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000027702**

1. Entity Name

ARIANA PROPERTIES, LLC



Principal Place of Business

1427 OCEAN VIEW DRIVE  
TIERRA VERDE, FL 33715

Mailing Address

1427 OCEAN VIEW DRIVE  
TIERRA VERDE, FL 33715



04162007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

NOT APPLICABLE

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HINES, JAMES P JR  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606

**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**

U00000728684  
05/08/07-80007-010 150.00

9. MANAGING MEMBERS/MANAGERS

TITLE: MGR  
NAME: LOSCH, SCOTT A  
STREET ADDRESS: 1427 OCEAN VIEW DRIVE  
CITY-ST-ZIP: TIERRA VERDE, FL 33715

TITLE: MGR  
NAME: LOSCH, DEBRA A  
STREET ADDRESS: 1427 OCEAN VIEW DRIVE  
CITY-ST-ZIP: TIERRA VERDE, FL 33715

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

**DO NOT WRITE  
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:** \_\_\_\_\_

4/16/07 727-324-2000