## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L03000027734

1. Entity Name FIRE CORAL STABLES, LLC



Principal Place of Business

1200 NORTH FEDERAL HIGHWAY, SUITE 420 C/O BUTZEL LONG, P.C.

BOCA RATON, FL 33432

Mailing Address

1200 NORTH FEDERAL HIGHWAY, SUITE 420 C/O BUTZEL LONG, P.C.

BOCA RATON, FL 33432

## **FILED** Mar 10, 2008 08:00 AN Secretary of State



03012008 No Chg-LLC

CR2E083 (12/07)

| 4. | FEI Number |
|----|------------|
|    | 20-0219106 |

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

| <ol><li>Name and Address of Current Registered Ag</li></ol> | jent |
|---|------|
|---|------|

RAYMOND, JOHN J JR 1200 NORTH FEDERAL HIGHWAY, SUITE 420 C/O BUTZEL LONG, P.C. BOCA RATON, FL 33432

## DO NOT WRITE IN THIS SPACE

3 K

Date

| SIGNATURE.   | Signature, typed or printed name of registered agent and title if applicable                        | (NOTE: Registered Agent signature required when reinstating) | DATE                                      |  |
|--|---|--|---|--|
| FILE<br>After May  | NOW!!! FEE IS \$138.75<br>y 1, 2008 Fee will be \$538.75  |  |   |  |
| 9.   | MANAGING MEMBERS/MANAGERS   |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | MGR<br>FIRE CORAL MANAGEMENT, INC.<br>1200 NORTH FEDERAL HIGHWAY, SUITE 420<br>BOCA RATON, FL 33432 |  |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  | 000000851405<br>03/25/08-80037-018 138.75 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   | DO   | NOT WRITE                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |   | IN 7   | HIS SPACE                                 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  |   |  |
| 11. I hereby certify that the information supplied with this filling 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 empowared to execute this report as required by Chapter 608, Florida Statutes |   |  |   |  |