

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029225

FILED
Apr 30, 2008
Secretary of State

Entity Name: NORTH RIVER VILLAGE OF LABELLE, LLC

Current Principal Place of Business:

7985 TIGER PALM WAY
FT. MYERS, FL 33912

New Principal Place of Business:

7985 TIGER PALM WAY
FT. MYERS, FL 33966

Current Mailing Address:

P.O. BOX 62232
FT. MYERS, FL 33906

New Mailing Address:

FEI Number: 56-2381338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYSON, THOMAS
7985 TIGER PALM WAY
FT. MYERS, FL 33912 US

Name and Address of New Registered Agent:

DYSON, THOMAS
7985 TIGER PALM WAY
FT. MYERS, FL 33966 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: THOMAS DYSON

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DYSON, THOMAS
Address: 7985 TIGER PALM WAY
City-St-Zip: FT. MYERS, FL 33912

Title: MGRM (X) Delete
Name: OWENS, DAVID
Address: 12261 BANYON DRIVE
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DYSON, THOMAS
Address: 7985 TIGER PALM WAY
City-St-Zip: FT. MYERS, FL 33966

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS DYSON

MGRM

04/30/2008

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