

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030257

FILED
May 10, 2007
Secretary of State

Entity Name: CHRIST L.L.C.

Current Principal Place of Business:

2507 SE 25TH PL
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

2507 SE 25TH PL
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 01-0794393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MANCARE, KHRISTOPHOR
2507 SE 25TH PL
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MANCARE, KHRISTOPHOR
Address: 2507 SE 25TH PL
City-St-Zip: CAPE CORAL, FL 33904

Title: MGR () Delete
Name: JASIK, JADWIGA
Address: 2507 SE 25TH PL
City-St-Zip: CAPE CORAL, FL 33904

Title: MGR () Delete
Name: EBERTOWSKI, SEWERYN
Address: UL. DYWIZJONU 303 5H/10
City-St-Zip: GDANSK, PL 80-462 PL

ADDITIONS/CHANGES:

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

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

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: KHRISTOPHOR MANCARE AS MGR OF CHRIST LLC, MGR 05/10/2007

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