

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2007 8:00 am
Secretary of State

01-17-2007 90007 042 ****50.00

DOCUMENT # L03000031575					
1. Entity Name TOP TICK THOROUGHbred STABLES, LLC					
Principal Place of Business TOP TIER THOROUGH STABLES LLC 7810 66TH AVENUE VERO BEACH, FL 32967			Mailing Address 5554 N. HARBOR VILLAGE DRIVE VERO BEACH, FL 32967		
2. Principal Place of Business - No P.O. Box # 5554 N. HARBOR VILLAGE DR Suite, Apt. #, etc. VERO BEACH FL		3. Mailing Address Suite, Apt. #, etc.			
City & State City: 32967 State: USA		City & State City: Zip: Country:		4. FEI Number 20-0242105	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RIZZI, LEONARD J 5554 N. HARBOR VILLAGE DRIVE VERO BEACH, FL 32967			7. Name and Address of New Registered Agent Name: Street Address (P.O. Box Number is Not Acceptable): City: FL Zip Code:		
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>LEONARD J. Rizzi</u> (NOTE: Registered Agent signature required when reinstating.) DATE: <u>1/15/07</u>					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RIZZI, LEONARD J 5554 N. HARBOR VILLAGE DRIVE VERO BEACH, FL 32967	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: <u>Leonard J. Rizzi</u>			Date: <u>1/15/07</u> Daytime Phone #: <u>772-782121</u>		