2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Apr 30, 2008 08:00 AN Secretary of State DOCUMENT # L03000044028 1. Entity Name SIESTA GROUP, LLC Principal Place of Business Mailing Address **623 WATERSIDE WAY 623 WATERSIDE WAY** SARASOTA, FL 34242 SARASOTA, FL 34242 04112008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0675533 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MILLER, RANDELL DO NOT WRITE HINES, NORMAN, HINES & SULLIVAN, P.L. 315 SOUTH HYDE PARK AVENUE IN THIS SPACE TAMPA, FL 33606 6. 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) FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 1000000936309 MANAGING MEMBERS/MANAGERS 05/27/08-80005-013 138.75 TITLE MGR AUGUSTINE, ROBERT S NAME STREET ADDRESS 623 WATERSIDE WAY CITY-ST-ZIP SARASOTA, FL 34242 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF MALLE STREET ADDRESS CITY-ST-ZIP 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 606, Florida Statutes.

5 Augustine 4-17-08

FILED