2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000046664

1. Entity Name
BLACK SHEEP TRADING COMPANY, LLC

Principal Place of Business	Mailing Address
110 S. SEWALL'S POINT ROAD STUART, FL 34996	110 S. SEWALL'S POINT ROAD STUART, FL 34996

DO NOT WRITE IN THIS SPACE

04112007No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KRAMER, ROBERT S
853 SE MONTEREY COMMONS BLVD.
STUART, FL 34996

**DO NOT WRITE
IN THIS SPACE**

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_____
    Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee Is $50.00
Due by May 1, 2007

U00000757395
05/23/07-80068-009 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LAMB, STUART M JR
STREET ADDRESS	110 S. SEWALL'S POINT ROAD
CITY-ST-ZIP	STUART, FL 34996

TITLE	
NAME	
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CITY-ST-ZIP	

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IN THIS SPACE**

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: _____   10 Apr 07   772-781-4800
    SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #