


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

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**FILED**  
**Mar 27, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90483 030 \*\*\*\*50.00

<b>DOCUMENT # L03000051997</b> 1. Entity Name 1491 SECOND, LLC	
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Principal Place of Business 1401 SECOND ST. SARASOTA, FL 34236	Mailing Address 46 NORTH WASHINGTON BLVD., #1 SARASOTA, FL 34236
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<b>DO NOT WRITE IN THIS SPACE</b>
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30003378



02212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0564368	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  LPS CORPORATE SERVICES, INC. 46 NORTH WASHINGTON BLVD., #1 SARASOTA, FL 34236	<b>DO NOT WRITE IN THIS SPACE</b>
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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 fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WOOD, MARCIA L 1401 SECOND ST. SARASOTA, FL 34236
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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: Marcia L. Wood 3-27-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Marcia L. Wood, MGR