FILED Feb 01, 2007 08:00 Secretary of Sta

Applied For

\$5,00 Additional

Fee Required

Not Applicable

2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L03000055352 1. Entity Name NORTH PORT I, LLC Principal Place of Business Mailing Address 7331 OFFICE PARK PLACE, STE 200 7331 OFFICE PARK PLACE, STE 200 VIERA, FL 32940 VIERA, FL 32940 01232007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0521205 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent RENFRO, ROBERT M DO NOT WRITE 7331 OFFICE PARK PLACE, STE 200 VIERA, FL 32940 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 | 1 am familiar with, and accept

we oppidations on tablistating state.		
SIGNATURE		
	(NOTE: Registered Agent signature required when reinstating)	DATE

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

MANAGING MEMBERS/MANAGERS TITLE MARM NAME RENFRO, ROBERT 7331 OFFICE PK PLACE #200 VIERA, FL 32940 ITTLE MARM NAME EULER, ERNEST E STREET ADDRESS CITY-S1-ZIP TITLE MARM STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP	<u></u>	
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Street address City-St-Zip	TITLE	
City-S1-ZiP	NAME	
	STREET ADDRESS	
11. Thereby certify that the information supplied with this filling does not qualify for the exe	Crty-St-ZIP	
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U00000615137 02/06/07-80058-018 50.00

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Floridal indicated on this report is true and accurate and that my signature shall have the same legal effect as if made workship is limited liability company or the receiver or trustee empowered to execute this report as required by Chapter.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE