2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 28, 2008 8:00 am Secretary of State 04-28-2008 90049 024 ***138.75 DOCUMENT # L04000004326 RIVER COUNTRY I, LLC 11000000 Principal Place of Business Mailing Address 1313 WEST MIDWAY ROAD 1313 WEST MIDWAY ROAD FORT PIERCE, FL 34982 FORT PIERCE, FL 34982 04092008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 84-1637132 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MURPHY, TRAVIS E JR. DO NOT WRITE 1313 WEST MIDWAY ROAD FORT PIERCE, FL 34982 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME T.S. MURPHY HOLDINGS LIMITED PARTNERSHIP 1313 WEST MIDWAY ROAD STREET ADORESS CITY-ST-ZIP FORT PIERCE, FL 34982 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

OR AUTHORIZED REPRESENTATIVE

FILED