

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004536

FILED
Feb 05, 2007
Secretary of State

Entity Name: FRIENDS OF THE MYAKKA RIVER, LLC

Current Principal Place of Business:

238 FIDLER POINT DRIVE
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

238 FIDLER POINT DRIVE
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILLER, HAROLD O
333 SOUTH TAMiami TRAIL
SUITE 283
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIKARIA, PADMA
Address: 328 FIDLER POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGRM () Delete
Name: SIKARIA, KRISHNA
Address: 328 FIDLER POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: PADMA SIKARIA

PRES

02/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date