2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# L04000010146

Entity Name: STEWART RIVERHOUSE, LLC

Current Principal Place of Business:

1838 GUNN HIGHWAY
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

1838 GUNN HWY
ODESSA, FL 33556

New Mailing Address:

FEI Number: 20-0753297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, MICHAEL
1838 GUNN HIGHWAY
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

STEWART, CHRISTOPHER
1838 GUNN HIGHWAY
ODESSA, FL 33556 US

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: CHRISTOPHER STEWART 04/29/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: STEWART, MICHAEL
Address: 1838 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

Title: MGR ( ) Delete
Name: STEWART, LYNN D
Address: 1838 GUNN HWY
City-St-Zip: ODESSA, FL 33556

Title: MGR ( ) Delete
Name: L.D. & JUANITA STEWA, RT TBE
Address: 1838 GUNN HWY
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: STEWART, CHRISTOPHER
Address: 1838 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

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 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: CHRISTOPHER STEWART MGR 04/29/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date