

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023113

FILED  
Aug 05, 2008  
Secretary of State

Entity Name: HARVEST POINT PARTNERS LLC

## Current Principal Place of Business:

631 US HIGHWAY ONE  
#401  
NORTH PALM BEACH, FL 33408 US

## New Principal Place of Business:

307 FOURTH STREET  
LAKE PARK, FL 33403 US

## Current Mailing Address:

631 US HIGHWAY ONE  
#401  
NORTH PALM BEACH, FL 33408 US

## New Mailing Address:

307 FOURTH STREET  
LAKE PARK, FL 33403 US

FEI Number: 74-3118979      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

SLAY, JOSEPH B  
307 4TH STREET  
LAKE PARK, FL 33403 US

## Name and Address of New Registered Agent:

SLAY, JOSEPH B SR  
307 4TH STREET  
LAKE PARK, FL 33403 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: JOSEPH B SLAY, SR

08/05/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SLAY, JOSEPH B  
Address: 307 4TH STREET  
City-St-Zip: LAKE PARK, FL 33403 US

Title: MGRM ( ) Delete  
Name: SLAY, LISA A  
Address: 307 4TH STREET  
City-St-Zip: LAKE PARK, FL 33403

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SLAY, JOSEPH B SR  
Address: 307 4TH STREET  
City-St-Zip: LAKE PARK, FL 33403 US

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: JOSEPH B SLAY, SR

MGRM

08/05/2008

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