

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000026675		
1. Entity Name SOUNDSIDE, LLC		
Principal Place of Business 1703 QUINN DRIVE VIERA, FL 32955		Mailing Address 1703 QUINN DRIVE VIERA, FL 32955
DO NOT WRITE IN THIS SPACE		
		01222007 No Chg-LLC CR2E083 (11/05)
		4. FEI Number 20-0989843
		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent FRESE, GARY B 930 S. HARBOR CITY BOULEVARD STE. 505 MELBOURNE, FL 32901		DO NOT WRITE 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 (NOTE: Registered Agent signature required when reinstating) DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
000000620805 02/09/07-80051-014 50.00		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EHLER, HOWARD 1703 QUINN DRIVE VIERA, FL 32955	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM APPELBAUM, SAM 102 MARTIN BRANCH RD LEICESTER, NC 28748	
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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:  SAM APPLEBAUM		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date _____ Daytime Phone # _____		