

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 22, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # L04000036483**

1. Entity Name  
 SPRUCE ROAD TWO, LLC



Principal Place of Business  
 290 CYPRESS GARDENS BLVD  
 WINTER HAVEN, FL 33880

Mailing Address  
 290 CYPRESS GARDENS BLVD  
 WINTER HAVEN, FL 33880

**DO NOT WRITE IN THIS SPACE**



01312007 No Chg-LLC CR2E083 (11/05)

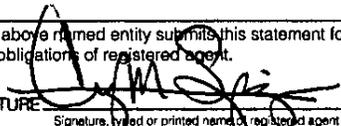
4. FEI Number 20-1149798	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

SPANJERS, CRAIG M  
 290 CYPRESS GARDENS BLVD  
 WINTER HAVEN, FL 33880

**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:  (NOTE: Registered Agent signature required when reinstating) DATE

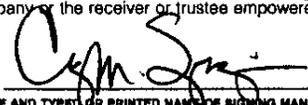
**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SPANJERS, CRAIG M 290 CYPRESS GARDENS BLVD WINTER HAVEN, FL 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000644697  
 03/02/07-80053-025 50.00

**DO NOT WRITE IN THIS SPACE**

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:  CRAIG M. SPANJERS 863 944-7598  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date 2-19-07 Daytime Phone #