

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037420

Entity Name: SHAMROCK DRIVE, LLC

FILED  
Aug 14, 2007  
Secretary of State

**Current Principal Place of Business:**

15090 SHAMROCK DRIVE  
FT. MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

15090 SHAMROCK DRIVE  
FT. MYERS, FL 33907

**New Mailing Address:**

FEI Number: 20-3265486      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:**

WITROSKY, STEVEN M  
15090 SHAMROCK DRIVE  
FT. MYERS, FL 33907      US

**Name and Address of New Registered Agent:**

RITROSKY, STEVEN M  
15090 SHAMROCK DRIVE  
FT. MYERS, FL 33907      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: STEVEN M RITROSKY

08/14/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WITROSKY, STEVEN M  
Address: 15090 SHAMROCK DRIVE  
City-St-Zip: FT. MYERS, FL 33907

Title: MGRM ( ) Delete  
Name: WITROSKY, JOHN DAVID  
Address: 14900 CANAAN DRIVE  
City-St-Zip: FT. MYERS, FL 33908

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RITROSKY, STEVEN M  
Address: 15090 SHAMROCK DRIVE  
City-St-Zip: FT. MYERS, FL 33907

Title: MGRM (X) Change ( ) Addition  
Name: RITROSKY, JOHN DAVID  
Address: 14900 CANAAN DRIVE  
City-St-Zip: FT. MYERS, FL 33908

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: STEVEN M RITROSKY

MGRM

08/14/2007

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