

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040897

FILED  
Aug 16, 2006  
Secretary of State

Entity Name: EXCEL BLOODSTOCK, LLC

**Current Principal Place of Business:**

6301 COLLINS AVENUE, STE. 2801  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

6301 COLLINS AVENUE, STE. 2801  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 20-1185597      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:**

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

SINGER, BERNARD A ESQ  
3107 STIRLING ROAD, STE. 105  
FT. LAUDERDALE, FL 33312      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: DELGUIDICE, RUDY  
Address: PO BOX 772734  
City-St-Zip: OCALA, FL 34477

Title: TREA      ( ) Delete  
Name: OBERTING, DAVID W  
Address: 6301 COLLINS AVE, APT 2801  
City-St-Zip: MIAMI BEACH, FL 33141

**ADDITIONS/CHANGES:**

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 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: DAVID W OBERTING

TRES

08/16/2006

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