## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000041711

1. Entity Name
COUNTYLINE RANCH, LLC



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business 2308 US HIGHWAY 301 N PALMETTO, FL 34221 Mailing Address

P.O. BOX 431

BRADENTON, FL 34206



DO NOT WRITE IN THIS SPACE

04132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1209477 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARLLEE, JOHN P IV 2308 HWY 301 N PALMETTO, FL 34221 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

9,	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	HARLLEE, SCOTT A
STREET ADDRESS	2308 US HIGHWAY 301 N
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	MGR
NAME	HARLLEE, JOHN P IV
STREET ADDRESS	2308 US HIGHWAY 301 N
CTTY-ST-ZIP	PALMETTO, FL 34221
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY+ST+ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
14. I hardly gottile that the information condical with this filling does not could be the	

DO NOT WRITE IN THIS SPACE

> U00000744203 FSZ15Z07-80138-021 50.00

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7-73-6

Date

Daytime Phone #