2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State

DOCUMENT # L04000047815 1. Entity Name RIVER COVE CENTRAL, LLC							04-30-2008 90016 028 ***138.75					
Principal Place of Business 872 COLORADO AVE STUART, FL 34994			Mailing Address 872 COLORADO AVE						Enni	14000	•	
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2. Principal Place of Business - No P.O. Box # 759 S. FEDERAL HIGHWAY			3. Mailing Address 759 S. FEDERAL HIGHWAY									
Suite, Apt. #, etc. SUITE 321			Suite, Apt. #, etc. SUITE 321			0311200	8	Chg-LLC	CR2E08	3 (12/06)		
City & State STUART, FL			City & State STUART, FL			4. FEI Nu 34-2	mber 0068	60	-		plied For t Applicable	
Zip	,	Country	Zip 34994	Count	try JSA			Status Desired		5.00 Add	itional	
34994	6. Name	USA and Address of Current				7. Name	and Ad	dress of New F				
GIUNTA, E		_			Name			si . s				
872 COLO STUART, 1		Ē		-	759 S	dress (P.O. Box Nu FEDERAL	HIG	HWAY	e) 			
,				-	SUITE	321				1 7 0 4		
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	e named entity tions of regist		or the purpose of changing its r	egistere	ea office or	registered agent, or	DOTH, I	n the State of Fig	onda. Tam ia	ımıllar witn, i	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if applicable. (NOTE:	Registered	d Agent signatu	re required when reinstating)		DATE			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75							Т.					
FILE After May	E NOW!!! y 1, 2008	FEE IS \$138.75 Fee will be \$538.7!	5						e check pa a Departme	-	•	
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indicated on this report is true and accurate and that my signature that 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 reserver entrustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WWW A WIND WAR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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Daytime Phone #