## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000054344

1. Entity Name TERRI OSBORN, LLC



FILED
Jan 25, 2008 08:00 AN
Secretary of State

Principal Place of Business

Mailing Address

4320 LAKE IN THE WOODS DRIVE SPRING HILL, FL 34607 US

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01152008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	 Applied For
20-1416873	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

IAN S GIOVINCO, PA 7215 HIAWATHA PARKWAY SPRING HILL, FL 34606

the obligations of registered agent.

**SIGNATURE** 

## DO NOT WRITE IN THIS SPACE

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	{NOTE: Registered Agent signature required when reinstating}	DATE
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSBORN, TERRI 4320 LAKE IN THE WOODS DRIVE SPRING HILL, FL 34607		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000738031 01/30/08-80013-020 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS .CITY-ST-ZIP	£* *		
TITLE CONTINUE CONTIN	^	· · · · · · · · · · · · · · · · · · ·	
11. I hereby indicated limited lia	certify that the information supplied with this filing does not of on this report is true and accurate and that my signature stability company or the receiver or trustee empowered to exe	qualify for the exemptions contained in Chapter that have the same legal effect as if made under cute this report as required by Chapter 608. Flori	19, Florida Statutes. I further certify that the information oath; that I am a managing member or manager of the da Statutes.

PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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