## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L04000058687** 08 APR 11 AM 9:53 BONLAND REAL ESTATE, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 2501 NORTH ORANGE AVENUE, SUITE 340 2501 NORTH ORANGE AVENUE, SUITE 340 ORLANDO, FL 32804 ORLANDO, FL 32804 03082008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0720536 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Regulred 8. Name and Address of Current Registered Agent SCHICK, DAVID L DO NOT WRITE 301 EAST PINE STREET, SUITE 1400 ORLANDO, FL 32801 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 FILE NOW!!! FEE IS \$138.78 After May 1, 2008 Fee will be \$538.75 : MANAGING MEMBERS/MANAGERS 9. MGRM ITILE COLE. DEBBIE NAME STREET ADDRESS 2501 N ORANGE AVE, #340 CITY-ST-ZIP ORLANDO, EL 32804 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-S1-7IP TITLE IN THIS SPACE MALE STREET ADDRESS

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:

CITY-ST-ZIP
TITLE
KAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS

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

Date 1

Dayline Phone #

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