

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082566

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** FOX RIVER HOLDINGS OF FLORIDA, LLC

**Current Principal Place of Business:**

1611 GUNN HIGHWAY  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

1611 GUNN HIGHWAY  
ODESSA, FL 33556

**New Mailing Address:**

FEI Number: 20-1913226      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

HOLCOMB, VICTOR W ESQUIRE  
106 SOUTH TAMPANIA AVE., SUITE 200  
TAMPA, FL 33609 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: MGRM ( ) Delete  
Name: LOWE, MICHAEL L  
Address: 1611 GUNN HYWAY  
City-St-Zip: ODESSA, FL 33556 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LOWE, MICHAEL L  
Address: 1611 GUNN HYWAY  
City-St-Zip: ODESSA, FL 33556 US

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL L LOWE

MGRM

05/01/2007

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