2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 23, 2008 8:00 am Secretary of State

According to Acco						Secretary of State		
1751 MOUND ST SARASOTA, FL 34236 SARASOTA, FL	1. Entity Name						_	
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City & State								
20-1946679	Suite, Apt. #, etc.		Suite, Apt. #, etc.		03282008 Chg-LLC	CR2E083 (12/06)		
E. Name and Address of Current Registered Agent F. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PARKER, THEODORE 2033 MAIN STREET, SUITE 100 SARASOTA, FL 34237 City FL Zip Code City FL Additio City FL	City & State		City & State				·	
PARKER, THEODORE 2033 MAIN STREET, SUITE 100 SARASOTA, FL 34237 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 Floride. I am familiar with, and accept the obligations or registered agent, or both, in the State of Floride. I am familiar with, and accept the obligations or registered agent. SIGNATURE 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 Floride. I am familiar with, and accept the obligations or registered agent. SIGNATURE 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 Floride. I am familiar with, and accept the obligations or registered agent, or both, in the State of Floride. I am familiar with, and accept the obligations or registered agent, or both, in the State of Floride. I am familiar with, and accept the obligations of registered agent. SIGNATURE 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 Floride. I am familiar with, and accept the purpose of the familiar with accept the purpose of the familiar	Zip	Country	Zip	Country			□ \$5.00 Add	litional
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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 eath; 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: Shelley R. Lister (Shelley R. Lister) 4/17/08 (941) 955-5940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Davis Davis Priore #