

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000086636

1. Entity Name
335 ELKHORN, LLC



Principal Place of Business
4788 WEST COMMERCIAL BLVD.
TAMARAC, FL 33319

Mailing Address
4788 WEST COMMERCIAL BLVD.
TAMARAC, FL 33319



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-1940044

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STREIT, THOMAS E
222 LAKEVIEW AVENUE
SUITE 400
WEST PALM BEACH, FL 33401

**DO NOT WRITE
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 \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SCHACK, DAVID
STREET ADDRESS	4788 WEST COMMERCIAL BOULEVARD
CITY-ST-ZIP	TAMARAC, FL 33319

TITLE	
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000000932205
05/22/08-80045-016 143.75

**DO NOT WRITE
IN THIS SPACE**

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