## **2007 LIMITED LIABILITY COMPANY**

**FILED** Mar 12, 2007 08:00 AM Secretary of State

ANNUAL REPORT	
DOCUMENT # L04000091778  1. Entity Name PORTRUSH, L.L.C.	
	16

Principal Place of Business

Mailing Address

73 SW FLAGLER AVE. STUART, FL 34994

73 SW FLAGLER AVE. STUART, FL 34994



## DO NOT WRITE IN THIS SPACE

C142E003 (11/03)
Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

MUELLER, LAWRENCE D

6. Name and Address of Current Registered Agent

73 SW FLAGLER AVE. STUART, FL 34994

## DO NOT WRITE IN THIS SPACE

		, ,	, in this of Asia			
		;			es.	
	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered a	gent, or both, in t	he State of Florida. I am	familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent signature required when	reinstating)	DATE		
FI	lling Foe is \$50.00 ue by May 1, 2007					
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MUELLER, LAWRENCE D 73 SW FLAGLER AVE. STUART, FL 34994	ì	d.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STUART, FL 34994		•	U00000 03/22/07-8	663963 0026-001 50.0	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO N	OT WRIT	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN TH	IS SPACI	<b>=</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,		٠	
11. I hereby	certify that the information supplied with this filling does not	qualify for the exemptions contained in	Chapter 119, Flo	rida Statutes. I further co	ertify that the information	

powered to execute this report as required by Chapter 608, Florida Statutes.

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