## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

O TYPES OR PRINTED NA

E OF SIGN

## - Feb 01, 2007 08:00 AM **DOCUMENT # L04000092783 Secretary of State** RED MANGROVE HOLDINGS, LLC Principal Place of Business Mailing Address 157 SAPODILLA DRIVE 157 SAPODILLA DRIVE ISLAMORADA, FL 33036 ISLAMORADA, FL 33036 01282007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2041047 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE RHYNE, JAMES A 157 SAPODILLA DRIVE ISLAMORADA, FL 33036 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 signsture required when rematiting) U00000616249 Filing Fee is \$50.00 Due by May 1, 2007 · 02/07/07-80020-021 50.00 9. MANAGING MEMBERS/MANAGERS MGRM TITLE NAME RHYNE, JAMES STREET ADDRESS 157 SAPODILLA DRIVE CITY-ST-ZIP ISLMORADA, FL 33036 MGRM MILE SPERL, GARY NAME STREET ADDRESS 403 PALM DRIVE CITY-ST-ZIP ISLAMORADA, FL 33036 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 1M E NAME STRICT ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS formation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the loft indicated on this report is limited liability company or

G MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED