


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # L04000093709 1. Entity Name SOUTH COUNTY HOLDINGS, LLC	
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Principal Place of Business C/O PARAMOUNT STRATEGY CORP. POB33002 SMB, ZEPHYR HSE, 5 FL,GRD CAYMN CAYMAN ISLAND, XX XXXXX XX	Mailing Address C/O GERSTIN & ASSOCIATES 1499 W. PALMETTO PARK ROAD, SUITE 412 BOCA RATON, FL 33486 US
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02192008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2119898	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent GERSTIN, JOSHUA G ESQ 1499 W PALMETTO PARK RD SUITE 412 BOCA RATON, FL 33486	DO NOT WRITE IN THIS SPACE
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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 NAME STREET ADDRESS CITY-ST-ZIP	MGR TOMPKINS, MARK 1499 W. PALMETTO PARK ROAD, SUITE 412 BOCA RATON, FL 33486
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04/03/08-80004-021 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied on 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.

SIGNATURE: _____

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

3-7-08

Date

Daytime Phone #