


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90030 037 \*\*\*138.75

**DOCUMENT # L05000007500**

1. Entity Name  
 FLORIDA BASIS FUND, LLC



Principal Place of Business 605 E. ROBINSON STREET, SUITE 500 ORLANDO, FL 32801	Mailing Address 605 E. ROBINSON STREET, SUITE 500 ORLANDO, FL 32801
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**DO NOT WRITE IN THIS SPACE**



04082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2408409	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

FREDERICK, CHARLES R  
 605 E. ROBINSON STREET  
 SUITE 500  
 ORLANDO, FL 32801

**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 \_\_\_\_\_ (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	P FREDERICK, CHARLES 205 LAKE COPELAND ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CASUSO, STEPHEN M 1311 BELMOUNT DRIVE ORLANDO, FL 32806
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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.

SIGNATURE: *Randa Pol* Date: 4-21-08 Daytime Phone #: 407 813 7070