

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008337

Entity Name: TERRA MAGNA LLC

FILED  
Jan 23, 2007  
Secretary of State

**Current Principal Place of Business:**

315 DUNES BLVD  
#504  
NAPLES, FL 34110 US

**New Principal Place of Business:**

315 DUNES BLVD  
#504  
NAPLES, FL 34110 US

**Current Mailing Address:**

**New Mailing Address:**

FEI Number: 20-2246370      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: POOLE, MICHAEL D  
Address: 315 DUNES BLVD #504  
City-St-Zip: NAPLES, FL 34110 US

Title: MGR ( ) Delete  
Name: SEBASTIAN, KIMBERLY  
Address: 315 DUNES BLVD #504  
City-St-Zip: NAPLES, FL 34110 US

Title: MGR ( ) Delete  
Name: WOODSIDE, THOMAS P  
Address: 315 DUNES BLVD #504  
City-St-Zip: NAPLES, FL 34110 US

Title: MGR ( ) Delete  
Name: WILHELM, DALE C  
Address: 315 DUNES BLVD #504  
City-St-Zip: NAPLES, FL 34110 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DALE C. WILHELM

MR.

01/23/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date