2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED DOCUMENT # L05000012418 1. Entity Name LIMACH, LLC 2008 MAR 21 AM 9: 09 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 1551 BAMBOO CIR PO BOX 1631 FORT MYERS, FL 33901 FORT MYERS, FL 33902 DO NOT WRITE IN THIS SPACE 03072008 No Chg-LLC CR2E083 (12/07) Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent METHENY, MARVIN L DO NOT WRITE 1551 BAMBOO CIR FORT MYERS, FL 33901 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME METHENY, MARVIN L 100121315451 STREET ADDRESS 1551 BAMBOO CIR _03/26/08-_01004---019 FORT MYERS, FL 33901 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

Daytime Phone #

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