FILED 2007 LIMITED LIABILITY COMPANY Jan 29, 2007 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # L05000014334 THUNDER RANCH, LLC Mailing Address Principal Place of Business 1364 SW BAYSHORE BLVD. 1364 SW BAYSHORE BLVD. PORT ST. LUCIE, FL 34983 US PORT ST. LUCIE, FL 34983 01232007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2432319 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DUNGEY, RICHARD J 3473 SE WILLOUGHBY BLVD STUART, FL 34994 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 little if applicable (NOTE Registered Agent signature required when reinstation) 02/01/07-80029-013 50.00 Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGR TITLE WINN, ROGER MAME STREET ADDRESS 1364 SW BAYSHORE BLVD. CITY-ST-79 PORT ST. LUCIE, FL 34983 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling 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 eath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:\

CITY-ST-ZIP

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

1-23-07

272-879 6826

Daytime Phone #