

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015232

FILED
Apr 16, 2008
Secretary of State

Entity Name: TALL PINES LLC

Current Principal Place of Business:

614 9TH STREET N
IMMOKALEE, FL 34142

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8944
NAPLES, FL 34101

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOEL, MARTINEAU
4575 VIA ROYALE
SUITE 218
FT MYERS, FL 33919 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: MGRM () Delete
Name: LONG, GARY C
Address: P.O. BOX 8944
City-St-Zip: NAPLES, FL 34101

ADDITIONS/CHANGES:

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: GARY LONG

MGRM

04/16/2008

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