

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030464

Entity Name: ENT COUNTRYSIDE ,LLC

FILED  
Jan 19, 2007  
Secretary of State

## Current Principal Place of Business:

1330 SOUTH FORT HARRISON AVE  
CLEARWATER, FL 33756 US

## New Principal Place of Business:

## Current Mailing Address:

1330 SOUTH FORT HARRISON AVE  
CLEARWATER, FL 33756 US

## New Mailing Address:

FEI Number: 20-2613957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CANTU, DAVID O  
25400 US HIGHWAY 19 N. SUITE 116  
CLEARWATER, FL 33763 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: ANTHONY, STEVEN  
Address: 1330 SOUTH FORT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR ( ) Delete  
Name: ALIDINA, ARIF  
Address: 1330 SOUTH FORT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR ( ) Delete  
Name: BARNA, JAMES  
Address: 1330 SOUTH FORT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR ( ) Delete  
Name: COHEN, LANCE  
Address: 1330 SOUTH FORT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR ( ) Delete  
Name: MILLER, MITCH  
Address: 1330 SOUTH FORT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR ( ) Delete  
Name: STEINIGER, JOSEPH  
Address: 1330 SOUTH FORT HARRISON AVE  
City-St-Zip: CLEARWATER, FL 33756 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:

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 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: LANCE COHEN

MGR

01/19/2007

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