2007 LIMITED LIABILITY COMPANY

SIGNATURE:

SIGNATURE AND TY

ANNUAL REPORT FILED DOCUMENT # L05000031282 5 2007, 08:00 AM clary of State ALAFIA RIVERWOODS, LLC Principal Place of Business Mailing Address 6521 RIVERWOODS DR. 3959 POINSETTIA DR. RIVERVIEW, FL 33569 ST. PETERSBURG, FL 33706 07252007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1663854 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ' HAWK, JERRY DO NOT WRITE 3959 POINSETTIA DR, ST. PETERSBURG, FL 33706 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 (NOTE: Registered Agent signature required when reinstalling) DATE Filing Fee is \$50.00 Due by September 14, 2007 9, MANAGING MEMBERS/MANAGERS 12 MGR TITLE HAWK, JERRY NAME STREET ADDRESS 3959 POINSETTIA DR. CITY-ST-ZIP ST. PETERSBURG, FL 33706 U00000770832 07/31/07-80002-024 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemptions confained 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 visuatee empowered to execute this report as required by Chapter 608, Florida Statutes.

ED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE