

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000041973**

1. Entity Name  
**ESENBERG HARBOR POINTE, LLC**



Principal Place of Business 3431 PARKWAY BLVD. LAND O'LAKES, FL 34639	Mailing Address 3431 PARKWAY BLVD. LAND O'LAKES, FL 34639
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**DO NOT WRITE IN THIS SPACE**



01082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3158791	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

LASMAN, JEFFREY M ESQ.  
 C/O LASMAN LAW FIRM, P.A.  
 1210 MILLENNIUM PARKWAY  
 BRANDON, FL 33511

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	ESENBERG, SCOTT C
STREET ADDRESS	3431 PARKWAY BLVD.
CITY-ST-ZIP	LAND O'LAKES, FL 34639
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

000000779121  
 01/11/08-80025-022-138.75

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.

**SIGNATURE:** Scott C Esenberg **Scott C Esenberg** 1/9/08 813 948-4440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #