

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000046375

FILED
Jan 16, 2008
Secretary of State

Entity Name: BOCA PINES, LLC

Current Principal Place of Business:

4257 SW HIGH MEADOW AVE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

4257 SW HIGH MEADOW AVE
PALM CITY, MI 34990 US

New Mailing Address:

FEI Number: 20-3722219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIST, CHAD D CHAD QU
4257 SW HIGH MEADOW AVE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

QUIST, CHAD D MEMBER
4257 SW HIGH MEADOW AVE
PALM CITY, FL 34990 US

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: CHAD QUIST

01/16/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: QUIST, CHAD D CHAD QU
Address: 4257 SW HIGH MEADOW AVE
City-St-Zip: PALM CITY, FL 34990 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: QUIST, CHAD D CHAD QU
Address: 102 SE RIO CASARANO
City-St-Zip: PORT ST LUCIE, FL 34984 US

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: CHAD QUIST

MGRM

01/16/2008

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