2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000059303

1. Entity Name

CARRIAGE HOUSE HOLDINGS, LLC



FILED Mar 26, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

7118 SE OSPREY STREET HOBE SOUND, FL 33455 7118 SE OSPREY STREET HOBE SOUND, FL 33455



03212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 26-0123684 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOOGE, HOWARD E JR ESQ 401 E. OSCEOLA STREET STUART, FL 34994

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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

DATE

U000006709ื่อื่ร

Filing Fee is \$50.00 Due by May 1, 2007 04/03/07-80017-005 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	SMITH, RONALD D
STREET ADDRESS	52 LIVÉ OAK CIRCLE
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	MGR
NAME	SALINGER, JR, JAMES
STREET ADDRESS	177 N. US HWY 1, #104
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	

DO NOT WRITE IN THIS SPACE

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 accordand 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/21/07

772-546-1837

ale

Daytime Phone #