

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059803

FILED  
Feb 08, 2008  
Secretary of State

Entity Name: RAINBOW PARK GARDENS LLC

**Current Principal Place of Business:**

C/O OPA-LOCKA CDC  
490 OPA-LOCKA BLVD., SUITE 20  
OPA-LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

C/O OPA-LOCKA CDC  
490 OPA-LOCKA BLVD., SUITE 20  
OPA-LOCKA, FL 33054

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LITTLE, JOHN  
LEGAL SERVICES OF GREAT MIAMI INC.  
3000 BISCAYNE BLVD. SUITE 500  
MIAMI, FL 33137 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: MGRM ( ) Delete  
Name: LOGAN, WILLIE  
Address: 490 OPA LOCKA BLVD  
City-St-Zip: OPA LOCKA, FL 33054

Title: M ( ) Delete  
Name: WILLIAMS-BALDWIN, STEPHANIE  
Address: 490 OPA LOCKA BLVD  
City-St-Zip: OPA LOCKA, FL 33054

**ADDITIONS/CHANGES:**

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 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: WILLIE LOGAN

MGRM

02/08/2008

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