2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 25, 2007 08:00 AM DOCUMENT # L05000061761 **Secretary of State** 1. Entity Name AMBROSIA FL. LLC Principal Place of Business Mailing Address 1732 OAK LAKES DRIVE 1732 OAK LAKES DRIVE SARASOTA, FL 34232 SARASOTA, FL 34232 CR2E083 (11/05) 07042007No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3071664 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHISHOLM, CRYSTAL DO NOT WRITE 1732 OAK LAKES DRIVE SARASOTA, FL 34232 IN THIS SPACE 3. 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) 000000770501 07/25/07-80006-009 50.00 Filing Fee is \$50.00 Due by September 14, 2007 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE CHISHOLM, CRYSTAL NAME STREET ADDRESS 1732 OAK LAKES DRIVE SARASOTA, FL 34232 CITY-ST-7/P MANE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE THIF MAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZP 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.

NG MANAGING WEMBER, OR <u>AU</u>THORIZED REPRESENTATIVE