

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000061909

1. Entity Name
LITTLE HARBOUR, L.L.C.



Principal Place of Business
**5704 NUTMEG AVE
SARASOTA, FL 34231**

Mailing Address
**5704 NUTMEG AVE
SARASOTA, FL 34231**



04112007 No Chg-LLC

CRZE083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3143575

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PARKER, THEODORE
2033 MAIN STREET, SUITE 100
SARASOTA, FL 34237**

**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 renewing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
HENTSCHEL, RAINER
106 WEST CLEVELAND BAY CT
GREENVILLE, SC 29615**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RUBIN-HENTSCHEL, ANN
106 WEST CLEVELAND BAY CT
GREENVILLE, SC 29615**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
WIELER, WOLFGANG
726 SYMMETRY COURT
BOILING SPRINGS, SC 29316**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
WIELER, SYBILLE
726 SYMMETRY COURT
BOILING SPRINGS, SC 29316**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
DABRINGHAUS, SHIRLEY
5704 NUTMEG AVE
SARASOTA, FL 34231**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
HUNDERT, JOEL
57 YOUNG STREET
HAMILTON ONTARIO CANADA**

**DO NOT WRITE
IN THIS SPACE**

U00000711783
04/26/07-80020-021 50.00

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 606, Florida Statutes.

SIGNATURE: _____

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

Date

Daytime Phone #

SHIRLEY J. DABRINGHAUS