2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 30, 2008 08:00 AM Secretary of State **DOCUMENT # L05000069846** COCHIN COUNTRY CLUB, LLC Principal Place of Business Mailing Address 6953 NW 19 STREET **6953 NW 19 STREET** MARGATE, FL 33063 MARGATE, FL 33063 04122008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3156783 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KUNCHANDY, GEORGE DO NOT WRITE 6953 NW 19 STREET MARGATE, FL 33063 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. GEORGE KUNCHANDY) (NOTE: Registored Agent signature required when reinstating) FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME KUNCHANDY, GEORGE STREET ADDRESS **6953 NW 19 STREET** CITY-ST-ZIP MARGATE, FL 33063 TITLE NAME STREFT ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

7792640.