

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 01, 2008 8:00 am
Secretary of State

04-01-2008 90063 038 ***138.75

DOCUMENT # L05000071577 1. Entity Name KOALA BEAR, LLC																							
Principal Place of Business 430 NORTH G STREET LAKE WORTH, FL 33460		Mailing Address 1281 GEORGIA RD FRANKLIN, NC 28734																					
2. Principal Place of Business - No P.O. Box # 316 Orange Tree Drive Suite, Apt. #, etc. Apt B City & State Atlantis Zip 33462		3. Mailing Address 316 Orange Tree Drive Suite, Apt. #, etc. Apt B City & State Atlantis Zip 33462																					
Country Palm Beach		Country Palm Beach																					
6. Name and Address of Current Registered Agent ELK, SCOTT A 4800 N. FEDERAL HIGHWAY SANCTUARY CENTRE, STE. 200E BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name James A. VanderWoude Street Address (P.O. Box Number is Not Acceptable) 316 Orange Tree Dr. Unit B City Atlantis																					
4. FEI Number 20-4325900		Applied For <input type="checkbox"/> Not Applicable																					
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		03192008 Chg-LLC CR2E083 (12/06)																					
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. Mbr-manager James A. VanderWoude 3/28/08 SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																							
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State																					
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> MGRM VANDER WOUDE, JAMES 1281 GEORGIA RD PMB 453 FRANKLIN, NC 28734 </td> </tr> <tr> <td></td> <td style="text-align: right;"> <input type="checkbox"/> Delete </td> </tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VANDER WOUDE, JAMES 1281 GEORGIA RD PMB 453 FRANKLIN, NC 28734		<input type="checkbox"/> Delete	10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition														
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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.																							
SIGNATURE:		James VanderWoude Mgr 828 369 6341 Date: 3-28-08																					