2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000076218

1. Entity Name

EBER ROAD HOLDINGS, LLC



FILED Mar 13, 2008 08:00 AN Secretary of State

Principal Place of Business

300 E. NEW HAVEN AVENUE MELBOURNE, FL 32901

Mailing Address

300 E. NEW HAVEN AVENUE MELBOURNE, FL 32901



DO NOT WRITE IN THIS SPACE 4. FEI Number

CR2E083 (12/07)

4. FEI Number 20-3251460

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PENCE, ROY J 300 E. NEW HAVEN AVENUE MELBOURNE, FL 32901

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 tamiliar 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)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee w!!! be \$538.75

U00000856638 03/28/08-80021-001 138.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENCE, ROY J 300 E. NEW HAVEN AVENUE MELBOURNE, FL 32901	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Roy J. Pence

3/1/08

(321) 837-0350

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

Date

Daytime Phone ≱