## 2008 LIMITED LIABILITY COMPANY

## Feb 18, 2008 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # L05000089964** LAUREL ROAD NORTH, LLC Mailing Address Principal Place of Business 240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR 240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR SARASOTA, FL 34236 SARASOTA, FL 34236 CR2E083 (12/07) 01212008No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number 20-3459571 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHEMBRI, JENIFER S DO NOT WRITE 240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR SARASOTA, FL 34236 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE BAND, DAVID S NAME 240 S PINEAPPLE AVE 10TH FLOOR STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34236 HILE U00000830683 NAME 02/26/08-80093-009 138.75 STREET ADDRESS CITY-ST-ZIP TITLE DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 each; that I am a managing member or manager of the limited liability company or the procedure or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE TYPED OR PRINTED NAME OF SIGNING ESENTATIVE

David S./Band

STREET ADDRESS CITY-ST-ZIP

**FILED**