## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000090548

Entity Name: LOST BOYS, LLC.

City-St-Zip:

FILED May 05, 2008 Secretary of State

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
1111 SE 4 OCALA, F				
Current Mailing Address:		New Maili	New Mailing Address:	
1111 SE 4: OCALA, FI				
In accordan	: 20-3459111 FEI Number Applied For() FEI I ce with s. 607.193(2)(b), F.S., the limited liability company o Address of Current Registered Agent:			
TIM, KENN 1111 SE 4: OCALA, FI	9TH AVE.			
	named entity submits this statement for the purpose of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete TIM, KENNEDY 1111 SE 49TH AVE OCALA, FL 34471 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	MGR ( ) Change (X) Addition GARLISI, MIKE 2085 SE 33RD ST OCALA, FL 34471 US	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	MGR ( ) Change (X) Addition ROBERSON, TIM 2307 SE 22ND LOOP OCALA, FL 34471 US	
Title: Name:	( ) Delete	Title: Name:	MGR () Change (X) Addition WALKER, JOHN	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip: OCALA, FL 34471 US

SIGNATURE: TIM KENNEDY MGRM 05/05/2008