2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 27, 2008
Secretary of State

DOCUMENT# L05000094103

Entity Name: ERIE EQUESTRIAN CENTER, LLC

Current Principal Place of Business:

10875 60TH STREET NORTH
PINELLAS PARK, FL 33782

New Principal Place of Business:

Current Mailing Address:

13770 58TH STREET NORTH
BLDG #3, SUITE 312
CLEARWATER, FL 33760

New Mailing Address:

10875 60TH STREET NORTH
PINELLAS PARK, FL 33782

FEI Number: 20-3532832 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RESIDENT AGENT CORPORATION OF PINELLAS CTY
980 TYRONE BLVD. NORTH
ST PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BURLING, MARC J MGRM
Address: 13540 WALSINGHAM ROAD SUITE B
City-St-Zip: LARGO, FL 33774

Title: MGR (X) Delete
Name: BECK, STEPHANIE MGR
Address: 13540 WALSINGHAM ROAD SUITE B
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BECK, STEPHANIE MGRM
Address: 10875 60TH ST N
City-St-Zip: PINELLAS PARK, FL 33782

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: STEPHANIE BECK MGRM 08/27/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date