

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098874

Entity Name: CIARAVELLA FAMILY LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

6522 GUNN HIGHWAY
TAMPA, FL 336254022

New Principal Place of Business:

Current Mailing Address:

6522 GUNN HIGHWAY
TAMPA, FL 336254022

New Mailing Address:

FEI Number: 20-3813755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLINT, SARA
6522 GUNN HIGHWAY
TAMPA, FL 336254022 US

Name and Address of New Registered Agent:

FLINT, SARA K
6522 GUNN HIGHWAY
TAMPA, FL 336254022 US

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: SARA K FLINT

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SUAREZ, JACK
Address: 6522 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 336254022

Title: MGR () Delete
Name: SUAREZ, ROBERT
Address: 6522 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 336254022

Title: MGR () Delete
Name: KOCH, DONNA S
Address: 6522 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 336254022

Title: MGR () Delete
Name: WALTERS, BEVERLY S
Address: 6522 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 336254022

Title: MGR () Delete
Name: HAMBLEY, PATRICIA
Address: 6522 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 336254022

ADDITIONS/CHANGES:

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

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

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

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

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: JACK D SUAREZ

MGR

04/30/2008

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