## 2007 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Apr 30, 2007 08:00 All Secretary of State **DOCUMENT # L05000105599** 1. Entity Name LA CROIX, LLC Principal Place of Business Mailing Address 7055 29TH COURT 7055 29TH COURT VERO BEACH, FL 32967 VERO BEACH, FL 32967 04262007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3709230 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZINK, DANIEL J DO NOT WRITE 7055 29TH COURT VERO BEACH, FL 32967 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registored Agent aigneture required when reinstating) Filing Fee Is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MGRM TITLE ZINK, DANIEL J NAME STREET ADDRESS 7055 29TH COURT CITY-ST-ZIP VERO BEACH, FL 32967 TITLE MGRM VALENTINO, ANTHONY NAME STREET ADDRESS 2905 29TH COURT CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP U00000743175 TITLE 05/15/07-80099-009 50.nn NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling 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 hmited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

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