

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119938

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** INDIAN TRAIL PROPERTIES, LLC

**Current Principal Place of Business:**

1703 SW BOATSWAIN PLACE  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

1703 SW BOATSWAIN PLACE  
PALM CITY, FL 34990

**New Mailing Address:**

**FEI Number:** 20-3974750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DESANTIS, CONRAD J ESQ.  
11891 U.S. HIGHWAY ONE  
SUITE 100  
NORTH PALM BEACH, FL 33408 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:** PRES ( ) Delete  
**Name:** RAYSIDE, CHARLES C MR.  
**Address:** 1703 SW BOATSWAIN PLACE  
**City-St-Zip:** PALM CITY, FL 34990 US

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES:**

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

**Title:** TRES ( ) Change (X) Addition  
**Name:** RAYSIDE, KAREN S MRS.  
**Address:** 1703 SW BOATSWAIN PLACE  
**City-St-Zip:** PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the 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:** CHARLES C RAYSIDE

PRES

04/17/2007

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