2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000123214

1. Entity Name 1884, LLC



FILED Jan 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

9913 RIVERVIEW DRIVE RIVERVIEW, FL 33569 9913 RIVERVIEW DRIVE RIVERVIEW, FL 33569



01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DOBBINS, LESLEY W 9913 RIVERVIEW DR. RIVERVIEW, FL 33569

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| 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 | | | | |
| | Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating) | DATE | |
| Filing Fee is \$50.00 Due by May 1, 2007 | | | U00000593601 017 50 00 | |
| 9. | MANAGING MEMBERS/MANAGERS | | 017 CC 01 00054-01 (50.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR DOBBINS, LESLEY W 9913 RIVERVIEW DR. RIVERVIEW, FL 33569 | | | |
| TITLE | MGR | | | |
| NAME | DOBBINS, OWEN F | i | | |
| STREET ADDRESS CITY-ST-ZIP | 9913 RIVEREVIEW DR. RIVERVIEW, FL 33569 | i | | |
| TITLE | | | | |
| NAME | | | | |
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| TITLE | | | j | |
| NAME STREET ADDRESS | | | | |

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

SIGNATURE:

CITY-ST-ZIP

MAJURE AND TYPED OR PRINTED NAME OF BIGNING MA

F BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/15-/07 813-677.8684 Date Daylors Proce 8