2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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indicated on this reporting

SIGNATURE

FILED Apr 23, 2007 8:00 am Secretary of State 04-20-2007 90027 021 ****50.00 30005335 04112007 Chg-LLC CR2E083 (12/06) Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Werrie E Make check payable to Florida Department of State ADDITIONS/CHANGES Change # 191

DOCUMENT # L06000002244 1. Entity Name SARASOTA GRAND CENTRAL, LLC Principal Place of Business Mailing Address 2 NORTH TAMIAM! TRAIL 2 NORTH TAMIAMI TRAIL SUITE 302 SUITE 302 SARASOTA, FL 34236 SARASOTA, FL 34236 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Country 6. Name and Address of Current Registered Agent YANCHEK, JOHN A 2 NORTH TAMIAMI TRAIL SUITE 302 SARASOTA, FL 34236 8. The above na tity 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 SIGNATURE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 10. 9. MGRM TTILE TITLE ☐ Delete JT ENTERPRISES OF SARASOTALLP NAME NAME 1282 SStr Our. E. 2 NORTH TAMIAMI TRAIL, SUITE 302 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34236 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

ue 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 preceive for trustee empowered to execute this report as required by Chapter 608, Florida Statutes.