

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010578

Entity Name: CLOVERHILL, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

13227 60TH STREET
WELLINGTON, FL 33467 US

New Principal Place of Business:

13227 60TH STREET
WELLINGTON, FL 33449 US

Current Mailing Address:

13227 60TH STREET
WELLINGTON, FL 33467 US

New Mailing Address:

13227 60TH STREET
WELLINGTON, FL 33449 US

FEI Number: 20-4336741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARKIN, TARI
13227 60TH STREET
WELLINGTON, FL 33467 US

Name and Address of New Registered Agent:

LARKIN, TARI
13227 60TH STREET
WELLINGTON, FL 33449 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: TARI LARKIN

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LARKIN, TARI
Address: 13227 60TH STREET
City-St-Zip: WELLINGTON, FL 33467 US

Title: MGR () Delete
Name: LARKIN, DAVID
Address: 13227 60TH STREET
City-St-Zip: WELLINGTON, FL 33467 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LARKIN, TARI
Address: 13227 60TH STREET
City-St-Zip: WELLINGTON, FL 33449 US

Title: MGR (X) Change () Addition
Name: LARKIN, DAVID
Address: 13227 60TH STREET
City-St-Zip: WELLINGTON, FL 33449 US

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: TARI LARKIN

MGRM

04/29/2008

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