

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000013317

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: GRASS RIVER PUBLISHING, LLC

## Current Principal Place of Business:

5510 SW 7TH STREET  
MARGATE, FL 33068

## New Principal Place of Business:

5510 SW 7TH STREET  
MARGATE, FL 330682906 BR

## Current Mailing Address:

5510 SW 7TH STREET  
MARGATE, FL 33068

## New Mailing Address:

5510 SW 7TH STREET  
MARGATE, FL 330682906 BR

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALTERS, DONALD R ESQ  
HUME & JOHNSON, P.A.  
1401 UNIVERSITY DRIVE, SUITE 301  
CORAL SPRINGS, FL 33071 US

## Name and Address of New Registered Agent:

WALTERS, DONALD R ESQ  
JOHNSON, ZIPPAY & WALTERS P.A.  
1401 N. UNIVERSITY DRIVE, SUITE 301  
CORAL SPRINGS, FL 33071 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: DONALD R. WALTERS, ESQ.

01/03/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SLAGER, WILLIAM  
Address: 5510 SW 7TH STREET  
City-St-Zip: MARGATE, FL 33068

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: SLAGER, WILLIAM G MGR  
Address: 5510 SW 7TH STREET  
City-St-Zip: MARGATE, FL 330682906 BR

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: WILLIAM G. SLAGER

MGR

01/03/2007

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